

Long Distance All-American Order Form

All-American certificate and patch commemorating this honor

low you would like the swimmer's nam	e to appe	ear on the certificate	2:	
ndicate the YEAR in which the All-Amer	ican swin	n was achieved:		
ndicate the EVENT in which the All-Ame	erican swi	im was achieved:		
nip All-American certificate and patch t	to the foll	lowing individual (N	o PO Box):	
		,	·	
First Name		Last Name	<u> </u>	MI
				MI
First Name Street Address City			Phone	MI

Instructions:

Email completed form(s) to events@usmastersswimming.org. Effective May 2024, there is no fee associated with this order form.

^{*}If you need help, please contact our event services team email events@usmastersswimming.org.