

Reference: 2019 Southern Wesleyan University, Central, SC

Dear Official:

Southern Wesleyan University will be hosting a home meet on Friday, April 5, Saturday, April 6, 2019. They will be paying \$75 per day, provide shared accommodation if required and meals during the meet. You will receive payment when you leave the meet.

Please complete the form below if you are available and email or mail it to me. Please note which nights you would require housing.

Thank you for all you do for the sport and your consideration of this event from the coaches, parents, athletes, meet management and staff at Southern Wesleyan University.

Valerie Beesley Sykes  
116 Runnymede Court  
Greenwood, SC 29649  
Home 864-943-9059  
Cell 864-993-3478 Work 864-942-2260  
[beesleyfamily@hotmail.com](mailto:beesleyfamily@hotmail.com)

Friday, April 5<sup>th</sup> \_\_\_\_\_ Saturday April 6<sup>th</sup> \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone Number \_\_\_\_\_

Other Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Need Hotel Accommodations? Yes \_\_\_\_\_ No \_\_\_\_\_

Nights Require Housing Thursday April 4 \_\_\_\_\_ Friday April 5 \_\_\_\_\_

Preferred Roommate \_\_\_\_\_

USATF Certified Official Number \_\_\_\_\_ Association \_\_\_\_\_

USATF Certified Official Level \_\_\_\_\_

Shirt Size \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Preferred Event(s) 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Official Name: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

Special Dietary  
Requirements \_\_\_\_\_

List of any allergies or medications we should be aware of: \_\_\_\_\_

\_\_\_\_\_