



Ravenscroft Key Club Swimathon
 supporting
**Duke Children's Hospital and
 Health Center**
November 3rd, 2011
10-12:15



Swimmer name: _____ Age _____ # laps predicted _____ (in 1 hour) (1 lap= there and back)

To be completed at end of swim: # laps achieved _____ Official's Signature _____

Name (please print)	Address	Phone	Pledge per Lap	Fixed pledge/total amount	Cash amount paid	OR Check To Duke Children's Hospital	After Race: Total Amount Due	Amount Collected
			OR	OR				
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
Totals								

Feel free to use the back if you have more than 8 sponsors!

Name (please print)	Address	Phone	Pledge per Lap	OR Fixed pledge/total amount	Cash	Check To <i>Duke Children's Hospital</i>	After Race: Total Amount Due	Date Collected
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								
20.								
21.								
22.								
23.								
24.								
25.								
26.								
GRAND TOTAL (from front and back)								