

# Meet Entry Fee Assistance Program

Pacific Swimming's Meet Entry Fee Assistance Program (MEFAP) serves Outreach registered athletes to cover a portion of meet fees for meets sanctioned in Pacific Swimming. Outreach registered athletes shall be responsible for the meet Splash Fee, which is \$8.00 for short course and \$14.00 for long course meets. Pacific Swimming shall be responsible for the remainder cost of entry. Athletes may change their registration status to Outreach at any time due to financial circumstances. Please visit <https://www.pacswim.org/documents/forms/Registration-Membership> to access the Outreach Athlete Application for Pacific Swimming.

## INSTRUCTIONS FOR SUBMITTING MEET ENTRIES

- **Meets Requiring Team Entry:** Teams should submit entries per instructions listed on the meet announcement. Teams will submit two checks to the meet host, one for MEFAP entry fees payable to Pacific Swimming and another for the remaining entry fees payable to the meet host. The entering team should submit a list of entered Outreach Athlete to PC Sanction Chair ([astein@pacswim.org](mailto:astein@pacswim.org)) when entries are sent to the meet host.
- **Meets Requiring Online Entries (FastSwims or SwimConnection):** Individuals submit entries using the MEFAP Entry Card below to the PC Sanction Chair, Annie Stein via email: [astein@pacswim.org](mailto:astein@pacswim.org). Entries for meets closing early due to capacity shall be considered based on the date of the email. Otherwise, entries will be accepted until the hand-delivered meet entry deadline listed on the meet announcement. Entry confirmations shall be sent to the entrant via email from FastSwims or SwimConnection.
- **Payment Options:** *All checks should include the name of the team hosting the meet on the Memo line.*
  1. **Individuals may mail in a check**, made payable to Pacific Swimming, postmarked by the mail-in entry deadline listed on the meet sheet. Mail to Pacific Swimming, % Annie Stein, 1080 South DeAnza Blvd, San Jose, CA 95129
  2. **Individuals may pay electronically** using Zelle (Zelle ID: [treasurer@pacswim.org](mailto:treasurer@pacswim.org)), received by the mail-in entry deadline listed on the meet sheet.
  3. **The athlete's coach may submit a check** made payable to Pacific Swimming to the Meet Director prior to the start of competition.

## PAYMENT AMOUNTS FOR MEFAP ENTRY FEES

The following amount should be paid by the Outreach Athlete depending on the type of meeting being entered.

- Short Course Meets: \$8.00
- Long Course Meets: \$14.00
- See payment options above
- The name of the team hosting the meet should be listed on the Memo line of the check

If you have questions, please contact Annie Stein: [astein@pacswim.org](mailto:astein@pacswim.org)

## How to find your USA Swimming Registration Number:

Athlete Name: Swimmer Of Pacific  
Athlete Date of Birth: January 1, 2005  
Registration Number: 010105SWIOPACI

Athlete Name: Swimmer PC  
Athlete Date of Birth: December 31, 2010  
Registration Number: 123110SWI\*PC\*\*

An athlete's registration is their 6 digit date of birth followed by the first 3 letters of their first name, their middle initial, and the first 4 letters of their last name. If an athlete does not have a middle initial please use an asterisk (\*) in its place. If an athlete's first or last name is shorter the required number of letters, please use an asterisk (\*) to fill in any blank spaces.

# **Meet Entry Fee Assistance Program Entry Card**

**Name of Meet** \_\_\_\_\_

**Meet Date:** \_\_\_\_\_ **Host Club:** \_\_\_\_\_

**Name** (Please **PRINT**) \_\_\_\_\_  
Last First M.I.

Club Abbr: \_\_\_\_\_

If UN, Club abbr: \_\_\_\_\_

Club Name: \_\_\_\_\_

Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Competition Gender: ☐ Female ☐ Male

USA Swimming Registration Number: \_\_\_\_\_

| Event # | Distance / Stroke | <input type="checkbox"/> Check if you would like to use all Best Times OR<br>Manually list Entry Times (SCY/LCM) |
|---------|-------------------|------------------------------------------------------------------------------------------------------------------|
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |
|         |                   | <input type="checkbox"/> SCY <input type="checkbox"/> LCM                                                        |

**Participation Fee =** ☐ SC - \$8.00 ☐ LC \$14.00 **Total # of Events** \_\_\_\_\_

Payment Method (please choose one): ☐ Mailing Check ☐ Zelle Electronic Payment ☐ Team Check at Meet

Coach: \_\_\_\_\_

Athlete's address: \_\_\_\_\_

Phone: \_\_\_\_\_

e-mail address: \_\_\_\_\_

*This section for Office use only:* Outreach Status Verified: ☐ YES ☐ NO

Email Received Date: \_\_\_\_\_