



Lake Swim V Swimmer Registration Form

Name: _____

Phone: _____

Email: _____

T-Shirt Size: S M L XL XXL

Do you need a swim cap? Yes No

Name of your Spotter: _____

Please submit by email to keating.jon@gmail.com or mail

to: Jon Keating

722 Salem St. Apt 1

Malden, MA 02148

Please submit at least 2 weeks prior to the event !!!