

**GATEWAY
TO GOLD**



2013 Paralympic Swim Athlete Talent ID
Coaches Clinic Registration

Coaches Name: _____

Address: _____ City: _____ St: _____ Zip: _____

E-Mail: _____ Phone: _____

Club Team: _____

My team has Paralympic eligible swimmers

Please email to Pam Lowenthal – pam.lowenthal@ilswim.org
or fax to: 847-824-1726