



SWIM ACROSS AMERICA – LONG ISLAND SOUND AND POOL SWIMS - 2018 SWIMMERS SPONSOR DONATION SHEET

POOL SWIMS

NYAC City House Sunday, April 29 7:00 am - 11:00 am
 NYAC Travers Island Friday, July 13 6:30 pm - 8:30 pm
 Westchester Country Club Saturday, July 14 6:30 am - 9:30 am

Orienta Beach Club Saturday, July 21 6:15 am - 9:30 am
 Chappaqua S&T Sunday, July 22 6:30 am - 9:30 am
 Lakeside Field Club Sunday, July 22 5:00 pm - 8:00 pm
 Coveleigh Club Monday, July 23 3:00 pm - 5:00 pm
 Lake Isle Swim Club Saturday, August 4 6:30 am - 9:30 am

LONG ISLAND SOUND SWIM

Saturday, July 28
Start: Larchmont Yacht Club
Finish: Larchmont Shore Club

Swimmers Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Team: _____ (if applicable)

Please print neatly. This form may be copied for additional names. For more information, visit our website WWW.SWIMACROSSAMERICA.ORG/LONG_ISLAND

Sponsors Name	Company	Address	City	State	Zip	Donation Collected

TOTAL Collected \$ _____

Make checks payable to: Swim Across America, Inc. All contributions are tax deductible as allowed by law. Corporate matching gifts are welcome. 10K swimmers must raise \$5,000 and all other swimmers must raise \$500 to participate in Long Island Sound Swim. Pool swimmers must raise \$500 or \$250 if under 18 years of age. All proceeds will be donated to the Cancer Support Team, the Tommy Palazzo Fellowship at Columbia University and Morgan Stanley Children’s Hospital of NY Presbyterian Medical Center, and The Swim Across America Laboratory at Memorial Sloan-Kettering Cancer Center.

Swim Across America, Inc * PO Box 217, Larchmont, NY 10538-0217 * Phone (914) 769-8411 / email: Tony@swimacrossamerica.org