



Spring Break 2014 Lake Havasu Rep Info Sheet

General Info

College: _____

House/Group Name: _____

Major: _____

Grad. Year: 2014 2015 2016 2017+

Contact Info

First Name: _____

Last Name: _____

Email: _____

Is this your first SWAT trip? Yes No Sex: Male Female

Current Address: _____

City: _____ State: _____ Zip: _____

Parents' Address: _____

City: _____ State: _____ Zip: _____

Desired Password for Acct. _____

Cell Phone: (_____) _____ - _____

Birthdate: _____ / _____ / _____

Trip Info - Please Choose Your Spring Break Week

Week 1: Mar. 10 - Mar. 13

Week 2: Mar. 17 - Mar. 20

Week 3: Mar. 24 - Mar. 27

Week 4: Mar. 31 - Apr. 3

Spring Break 2014 Lake Havasu Sales Goal: _____

Rep Referrals

Name: _____

School: _____

Cell Phone: (_____) _____ - _____

Name: _____

School: _____

Cell Phone: (_____) _____ - _____

Name: _____

School: _____

Cell Phone: (_____) _____ - _____

Name: _____

School: _____

Cell Phone: (_____) _____ - _____

Name: _____

School: _____

Cell Phone: (_____) _____ - _____

Final Info & Form Submission

First and last name of the person who asked you to submit this form. _____

SWAT Sales Manager: _____