

WATFORD SWIMMING CLUB
 November 2015 County Qualifier Open Meet
 Affiliated to the ASA East Region
 (Under ASA Laws and Technical Rules of Swimming)
 Licensed no (3ER150604)



Girls Entry Form

ASA Number		
Full Name		
D of B		Age as at 31st December 2015:
		Age as at 22nd November 2015:**
Club		
E-mail address		Mobile No:
Event No	Event	Entry Time (short Course)
1	400M freestyle	
3	100M breaststroke	
5	100M IM	
7	200M Backstroke	
9	100M Freestyle	
11	200M IM	
13	50M Butterfly	
16	400M IM ^^	
18	100M Backstroke	
20	200M Breaststroke	
22	100M Butterfly	
24	50M Breaststroke	
26	200M Freestyle	
28	50M Backstroke	
30	200M Butterfly	
32	50M Freestyle	

** minimum age of 9 at 22 November 2015

^^ minimum age of 11 at 31 December 2015

Total entry Fee £5.00 per event £ _____

 £6.00 per event (400s) £ _____

£1.00 Admin Fee per swimmer if applicable £ _____

Total Amount Payable £ _____

I hereby declare that the above particulars are correct and that I am an eligible competitor in accordance with the laws of the ASA and will abide by the conditions laid down by Watford Swimming Club for this competition.

Signature of competitor _____ Date _____

I certify that the above information is correct _____ Club Official