www.halsteadsc.co.uk email: info@halsteadsc.co.uk



6th Short Course Licensed Open Meet 12^h April 2015 Level 3 Licence No. 3ER150571

BRAINTREE SWIM CENTRE

Individual Entry Form

| | Places photos | CLUB | as required * Dol | _ - | 000001 | | |
|--|---|---|--|--|-------------------------------|----------------------------------|--|
| FIRST NAME | | SURNAME | s required * Delete as necessary | | | | |
| | registration card | SUNIAME | | | | | |
| (exactly as off regionation sara) | | | | | | | |
| ADDRESS (including Postcode) | | | DATE OF BIR | DATE OF BIRTH Male/Female* | | | |
| | | | Age as at 12 TH APRIL 2015 | | | | |
| | | ASA R | ASA Reg No. | | | | |
| Entries will not be accepted if the above in | | | | | | | |
| Event | Entry Time | Event | Entry Time | Event | | Entry Time | |
| 50m Free | | 100m Free | | 200m F | ree | | |
| 50m Back | | 100m Back | | | | | |
| 50m Fly | | 100m Fly | | / | | | |
| 50m Breast 100m Breast | | | | | ~ | | |
| | | 100m I.M. | | | \ | | |
| The prome I dec d. We h | c. He/she nave read, understan | ve named swimmer h b. the above perso is an eligible competi d, accept and will abo | e information is incorthe grounds of safety as achieved the entry anal details are correct tor according to the lav ide by the conditions so retary / Club Official De | v and overal time shown ; ws of the AS et by the Pro | I timing by his/he A pmoter / | of the event. er name Organiser. | |
| Enclose | ed are | entries @ £5.00 | each, totaling £ | | for this | entry form. | |
| One cheque or | nly per Club(please and sent togeth | wright your club na er with completed (| ame on the reverse) the Club Entry Forms and | his should l d a Summar | be made y sheet | payable to HASC | |

CLOSING DATE FOR ENTRIES IS MIDNIGHT 11TH MARCH 2015

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Return to: Mrs D HALL 14 KESTREL RISE, HALSTEAD,ESSEX,CO92TU