

**SHEFFIELD CITY B GRADE MEET 2015**

21st November 2015

Age as at 2st November 2015

**BOYS**

Swimmer's Name \_\_\_\_\_

Swimming Squad \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age on the day(s) \_\_\_\_\_ Years

ASA Reg No. \_\_\_\_\_

50m Free	
100m Free	
50m Back	
100m Back	
50m Breast	
100m Breast	
50m Fly	
100m Fly	
200m IM	

Entries .....@ £5.50 = £.....

I certify that the above entry times have been achieved in competition, in the qualifying period' and accept that all entries for the above swimmer will be rejected if the times cannot be verified.

Signature \_\_\_\_\_

**THIS FORM IS TO BE TAKEN TO YOUR COACH FOR APPROVAL AND SIGNATURE**

Coaches Signature \_\_\_\_\_

**ENTRY DATE 07/09/15****SHEFFIELD CITY B GRADE MEET 2015**

21st November 2015

Age as at 2st November 2015

**GIRLS**

Swimmer's Name \_\_\_\_\_

Swimming Squad \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age on the day(s) \_\_\_\_\_ Years

ASA Reg No. \_\_\_\_\_

50m Free	
100m Free	
50m Back	
100m Back	
50m Breast	
100m Breast	
50m Fly	
100m Fly	
20m IM	

Entries .....@ £5.50 = £.....

I certify that the above entry times have been achieved in competition, in the qualifying period' and accept that all entries for the above swimmer will be rejected if the times cannot be verified.

Signature \_\_\_\_\_

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**ENTRY DATE 07/09/15**