

YORKSHIRE WINTER OPEN MEET 201510TH & 11TH October 2015Age as at 11th October 2015**BOYS**Swimmer's Name **BLOCK CAPITALS** _____

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	
100m IM	
200m IM	

Entries@ £5.00 = £.....

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**YORKSHIRE WINTER OPEN MEET 2015**10TH & 11TH October 2015Age as at 11th October 2015**GIRLS**Swimmer's Name **BLOCK CAPITALS** _____

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	
100m IM	
200m IM	

Entries@ £5.00 = £.....

I certify that the above entry times have been achieved in competition,
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