

SHEFFIELD CITY 'B' GRADE MEET 2016

19th November 2016

Age as at 19th November 2016

BOYS

Swimmer's Name _____

Swimming Squad _____

Date of Birth _____ Age on the day(s) _____ Years

ASA Reg No. _____

Event	Time	Session Number
50m Free		
100m Free		
50m Back		
100m Back		
50m Breast		
100m Breast		
50m Fly		
100m Fly		
200m IM		

Entries@ £5.50 = £.....

Entries are based on upper limit times. Swimmers must not have swum faster than these times in the previous 12 months.

Signature _____

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

Coaches Signature _____

ENTRIES WILL BE TAKEN ON 26/09/16

SHEFFIELD CITY 'B' GRADE MEET 2016

19th November 2016

Age as at 19th November 2016

GIRLS

Swimmer's Name _____

Swimming Squad _____

Date of Birth _____ Age on the day(s) _____ Years

ASA Reg No. _____

Event	Time	Session Number
50m Free		
100m Free		
50m Back		
100m Back		
50m Breast		
100m Breast		
50m Fly		
100m Fly		
200m IM		

Entries@ £5.50 = £.....

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