



# WATFORD SWIMMING CLUB INVITATION MIDDLE DISTANCE OPEN

Affiliated to the East Region  
(Under ASA Laws and Technical Rules of Swimming)  
(Level 2 license applied for)



Saturday 28th November 2009

## ENTRY FORM

ASA ID number									
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Full Name _____	D.O.B: ____ / ____ /19 ____
Age as at 28 <sup>th</sup> November 2009 _____	Club _____ Male/Female
Address _____	
_____ Telephone No _____	

EVENT NO (Please circle)	EVENT	ENTRY TIME (25m times)
1 / 8	400m Freestyle (11 & Over)	
2 / 9	400m IM (11 & Over)	
3 / 10	200m IM (9 & Over)	
4 / 11	200m Freestyle (9 & Over)	
5 / 12	200m Breaststroke (9 & Over)	
6 / 13	200m Backstroke (9 & Over)	
7 / 14	200m Butterfly (9 & Over)	
<b>TOTAL ENTRY FEE ENCLOSED</b>	£ _____	

I hereby declare that the above particulars are correct and 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	

**ENTRY FEE IS £4.00 AN EVENT**