

Name of Club/Squad.....

Mini Meet Grand Prix 2017

| | |
|--|----------------------|
| Swimmers Name | |
| ASA Number | |
| Gender | Male / Female |
| Date of Birth | |
| Age as at 17th June 2017 | |
| Tel Number | |
| Parents / Family Email Address | |
| Home Address – Line 1 | |

Please Circle the rounds this entry form is for:

Round 3 & 4 / Round 5 & 6

10 / 11 / 12 / 13-14 Years Entry

| Event | Please enter times (or tick if no time) |
|--|---|
| 50 Freestyle | |
| 50 Backstroke | |
| 50 Breaststroke | |
| 50 Butterfly | |
| 200 Freestyle | |
| 200 I.M | |
| 100 I.M(Not included in Series or finals) 10 YEAR OLDS ONLY (if not entering 200IM) | |

Please tick the appropriate

Rounds 3-4 £25 (Jan & Feb Only)

Rounds 5-6 £25 (June Finals Only)

Please tick both boxes if entering rounds 3-6

Cheques payable to Stockport Metro Swimming Club

Please read the meet conditions and meet schedule before entering. These are available at www.stockport.metro.co.uk

HELPERS

If you are able to help please place your name, best contact and preferred Job below, Thank you.

Name

Job

Qualification None / Judge 1 / Judge 2 / Judge 2s / Referee

Contact Detail.....

The Club Closing Date is _____

The Mini Meet Closing Date for Rounds 3 & 4 is Friday 13th January 2017