MEET NAME.	Wirral Met	ro L2 October M	eet £ 5.00Per Event
A.S.A. Reg No			<u>D.O.B.</u> / /
Full Name. As it appears on the Rank	kings		Male / Female
CLUB REPRESENTING :			
STROKE	<u>TIME</u>	WHE	N & WHERE ACHIEVED
50 Free			
100 Free			
200 Free			
400 Free			
50 Back			
100 Back			
200 Back			
50 Brst			
100 Brst			
200 Brst			
50 Fly			
100 Fly			
200 Fly			
200 I.M.			
400 I.M.			
Total No of Entries	£ 5.00 Pe		FAL £ CHEQUE ONLY nade payable to Wirral Metro SC SC
		•	
SIGNED			SWIMMER or PARENT

Please return this form, including a cheque for the full amount,

To: CLUB DESK

Cut off date Sunday 8th september