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**St Davids Day Meet 2018**

 (Under FINA Technical Rules and Swim Wales Laws)

Pontypool Active Living Centre

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| Name ……………………….. First Name (in full) ………………..Middle Name …………..…… Age at 4th March 2018………..Male/Female ……………….. Date Of Birth….………...................Address ……………………………………………………………...Email address………………………………………………………...Post Code …………………… Tel No. …………………………...Name of Club ……………………………………………………….WASA/ASA Number ………………………………………………. |

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| --- | --- | --- |
| Event | Event Number | Estimated Time |
| 100m Back (11&12 &13’s & 14’s only) |  |  |
| 100mBreast (11&12 &13’s & 14’s only) |  |  |
| 100m Free (11&12 &13’s & 14’s only) |  |  |
| 50m Fly (all ages) |  |   |
| 50m Back |  |  |
| 50m Breast |  |  |
| 50m Free |  |  |
| Novice 25m (FC & BC) |  |  |
| 25m Free (8yrs only) |  |   |
| 25m Back(8yrs only) |  |  |
| 25m Breast (8yrs only) |  |  |
| 25m Fly (8yrs only) |  |  |
| 100m IM  |  |  |

 It is acceptable to enter “No Time” but please try and enter a time if possible

………… events at £3.50 = £……………….

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **TO BE COMPLETED BY THE Parent/Guardian :** |  |  |  |  |  |  |  |
| I declare that the above particulars are correct and agree to abide by the conditions laid down. I accept that  |
| There will be no refunds for incorrectly submitted entries. |  |  |  |  |  |  |
| Signature of parent/Guardian: ……………………………………………………………………. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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