# BILLINGHAM AMATEUR SWIMMING CLUB

## Gala Entry Form

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ASA Registration No | | | | | First Name | Surname | | | |
|  | | | | |  |  | | | |
| Date of Birth | | | | | Gala Date | | | | |
|  |  | |  | |
| Age on Day | | | | | Gala Entered | | | | |
| Event | | Time | | | Gala & Venue where Achieved | | Date | | |
| 50m Free | |  |  |  |  | |  |  |  |
| 100m Free | |  |  |  |  | |  |  |  |
| 200m Free | |  |  |  |  | |  |  |  |
| 400m Free | |  |  |  |  | |  |  |  |
| 800m Free | |  |  |  |  | |  |  |  |
| 1500m Free | |  |  |  |  | |  |  |  |
|  | |  |  |  |  | |  |  |  |
| 50m Back | |  |  |  |  | |  |  |  |
| 100m Back | |  |  |  |  | |  |  |  |
| 200m Back | |  |  |  |  | |  |  |  |
|  | |  |  |  |  | |  |  |  |
| 50m Fly | |  |  |  |  | |  |  |  |
| 100m Fly | |  |  |  |  | |  |  |  |
| 200m Fly | |  |  |  |  | |  |  |  |
|  | |  |  |  |  | |  |  |  |
| 50m Breast | |  |  |  |  | |  |  |  |
| 100m Breast | |  |  |  |  | |  |  |  |
| 200m Breast | |  |  |  |  | |  |  |  |
|  | |  |  |  |  | |  |  |  |
| 100m IM | |  |  |  |  | |  |  |  |
| 200m IM | |  |  |  |  | |  |  |  |
| 400m IM | |  |  |  |  | |  |  |  |
| Total Entered | |  | | | @ £ = | | £ | | |

Make sure P.B. times entered are correct, the responsibility is yours.

In the interest of swimmers development – all forms must be countersigned by their coach. If not the Competition Secretary will not process your entry.

Please pay cash or cheque (made payable to BASC) and hand back to Competition Secretary.

I certify that all the above details are correct and that I will abide by the meet conditions and the Code of Conduct of Billingham ASC.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Competitor Date \_\_\_\_\_\_\_\_\_\_\_\_\_

(if under 18 years Parent to sign)

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Coach