

# 12<sup>th</sup> INVERCLYDE MASTERS OPEN SWIMMING MEET

Waterfront Leisure Complex, Greenock

**Friday/Saturday 8<sup>th</sup>/9<sup>th</sup> September 2006**

## **RELAY TEAM ENTRY FORM**

**Please Print Clearly**

### 1. PERSONAL INFORMATION

TEAM REPS FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTCODE: \_\_\_\_\_ TEL NO: \_\_\_\_\_

CLUB NAME: \_\_\_\_\_

### 2. RELAY EVENTS ENTERED

- ◆ All Relay Swimmers must be affiliated to the same Swimming Club
- ◆ A Swimmer cannot swim for more than one team per relay event and can only represent one Club in the competition
- ◆ Ages of teams are total age as at 31<sup>st</sup> December 2006
- ◆ A time must be submitted below in order to enter an event
- ◆ Entries without a time will be allocated to the slowest heat
- ◆ **ENTRY FEE PER TEAM - £4.00**

EVENT	SEX	Up to 119	120 – 159	160 – 199	200 plus
4 x 50m Freestyle	MIXED				
4 x 50m Medley	MIXED				

**NO TIME CARDS REQUIRED**

**SEE OVER**

**3. PAYMENT DETAILS**

I enclose the following fees:

Number of Relay Teams entered \_\_\_\_\_ x £4.00

**TOTAL AMOUNT DUE**            £ \_\_\_\_\_

Payment of fees should be made by cheque or Postal Order and made payable to:

**Inverclyde Masters Swimming Club.**

All Entry Forms accompanied by the relevant Entry Fees should be forwarded to:

**Donald Muirhead  
3 Ryan Road  
Wemyss Bay  
PA18 6DH**

**4. DECLARATION**

I declare that the above particulars are correct and would confirm that the Club Members who comprise the Relay Teams have read, understood and agree to abide by the “Competitors Safety Code” appertaining to this Swim Meet as outlined within the related Information Booklet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name Printed in Full: \_\_\_\_\_

**CLOSING DATE FOR ENTRIES – 12<sup>th</sup> AUGUST 2006**