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**2019 OPEN WATER CHAMPIONSHIPS**

***This form is provided to help clubs gather entries and must be kept by the club. Originals or copies must not be sent to the Region. It cannot be used to submit an entry directly to the East Region.***

**The Region’s closing date for the entries is 14th June 2019. We require your form by**

**to enable us to process the entry in time.**

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| --- | --- | --- | --- |
| **SURNAME** |  | | |
| **FORENAMES** |  | **ASA REGISTRATION NO** |  |
| **DATE OF BIRTH** |  | **SEX (M/F)** |  |
| **LATEX ALLERGY** | | **Y/N** | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **DESCRIPTION OF EVENTS** | **COST** | **PLEASE TICK** |
| **EVENT 1** | **3km Freestyle** | **£22** |  |
| **EVENT 2** | **Novice 1km Freestyle –** *(Swum this event before? See condition 2)* | **£16** |  |
| **EVENT 3** | 2km Freestyle | **£22** |  |
| **EVENT 4** | **5km Freestyle Championship** | **£22** |  |

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| **No: Events entered at £16 per event No: Events entered at £22 per event** |
| **Total payment due £** |

*Submit completed forms with correct money to your club. Cheques should be payable to your club as they will make a bulk payment for all their entries.*

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| Please enter me into the Swim England East Region Open Water Championships and inform the organisers that I have a latex allergy if I answered Y above.  I declare that I am an eligible competitor as defined by Swim England Regulations.  I have read the Championship Conditions understand them and agree to abide by them. |
| Signature of Competitor ....................................................................... Date .................................................. |
| Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent/Guardian (Swimmer under 18) |