

**CHESHIRE COUNTY W.P. & SWIMMING ASSOCIATION**  
**(Affiliated to NWASA)**  
**INDIVIDUAL ENTRY FORM - 2010**

NAME.....  
 ADDRESS.....  
 .....  
 TEL. NO.....  
 MALE/FEMALE (Delete as applicable)

**CLUB STOCKPORT METRO**  
 DOB.....  
 Post Code.....  
 Email address.....  
 ASA REG No.....

**\* SUBMITTED TIMES FOR EVENTS MUST BE CONVERTED TO 25M POOL TIMES.**

- **AGE GROUPS:- 9yrs: 10yrs: 11yrs: 12yrs: 13yrs: 14yrs: 15yrs: 16yrs: Open (circle as applicable)**
- **Age as at 28<sup>th</sup> March 2010**

EVENT	ENTRY TIME	DATE & VENUE ACHIEVED
50m Free		
100m Free		
200m Free		
400m Free		
800m Free		
1500m Free		
50m Back		
100m Back		
200m Back		
50m Breast		
100m Breast		
200m Breast		
50m Fly		
100m Fly		
200m Fly		
100m IM		
200m IM		
400m IM		

**Entry Fee: £4.25 per event**

**No of Events**

**Total**

- **I have not competed in nor intend to compete in any other County's Championships or Age Groups during the present year. I represented any other County during the present year.**
- **I certify that all the above particulars are correct and that all entries times have been achieved in a Licensed Meet.**
- **PLEASE NOTE: Entry times will be checked against ASA rankings. Ineligible entries WILL BE rejected and the swimmer will forfeit the entry fee for the event(s).**

**SIGNED.....SWIMMER.....CLUB OFFICIAL**