

Greater Manchester Age Group Meet 2020

Please complete in **CAPITAL LETTERS**.

Surname		First Name	
Full Address			
& Postcode			
Tel. No.		Male/Female	
Date of Birth	___/___/___	Age at 01/03/2020 (whole yrs)	Yrs
ASA Reg. No			
e-mail		Club	
Gala 1	Sat 29 th Feb 2020	W/U 08:30 St 09:30	
Gala 2	Sat 29 th Feb 2020	W/U TBC St TBC	
Gala 3	Sun 1 st Mar 2020	W/U 08:30 St 09:30	
Gala 4	Sun 1 st Mar 2020	W/U TBC St TBC	

Submitted times are required for each event. Please note all events are HDW

Distance & Stroke	Event Number	Submitted Time mm:ss.ss	For official use only
50m Freestyle			
100m Freestyle			
200m Freestyle			
50m Backstroke			
100m Backstroke			
200m Backstroke			
50m Breaststroke			
100m Breaststroke			
200m Breaststroke			
50m Butterfly			
100m Butterfly			
200m Butterfly			
100 Individual Medley			
200m Individual Medley			

Total Number of entries _____ Total amount at £4.50 per event £ _____

This competition is licensed by the ASA for Level 3 Competitions

Details of all sessions are available on our Web Site at www.mdsdpa.org.uk in the section "Down Load Forms".
Please submit this Official Entry Forms **via your club** to:-

Club Competition Secretary: _____

Club Entry Cut-off Date: _____

FOR CLUB USE ONLY