GRSC GENERIC GALA SUBMISSION APPLICATION						
SWIMMER NAME			ASA Number			vie.
MALE/FEMALE			DOB (dd/mm/yyyy)			<u>CD</u>
GALA NAME						Greenwich
GALA DATES			AGE (on Day) or AGE (End of Year)		Delete as appropriate	Royals
GALA DATES						LM= Licenced Meet NLM=Non Licensed Meet TT = Time Trial BG= Best Guess
ALL EVENTS	ENTRY TIME (PB)	SESSION No.	EVENT No.	PER EVENT FEE	SHORT OR LONG COURSE	Where and how was PB Time achieved
50M FREE						
100M FREE						
200M FREE						
400M FREE						
800M FREE						
1500M FREE						
50M BACK						
100M BACK						
200M BACK						
50 Mt BRST						
100 Mt BRST						
200 Mt BRST						
50 Mt FLY						
100 Mt FLY						
200 Mt FLY						
100 Mt IM						
200 MT IM						
400 MT IM			ADMIN FEE			
1. EXCEL spreadsheet filled in and sent to:			greenwichroyals@gmail.com AND rchapmanswimming@gmail.com			
2. Electronic version (preferable) or printed version, cheque (with Swimmers name, ASA Number and Meet details on the back) to:  3. Cheques to be mad 4. One Cheque per Sw	le out to: vimmer / Gala		Rob Chapman @ 8 Kenya Road, Charlton, London, SE7 7BH Greenwich Royals Swimming Club			
Signature of Parent or Swimmer						
Date						
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