

The A'MAY'zing Spring Development Meet

Saturday 6th & Sunday 7th May 2017

Licensed Level 3ER170752
Held under ASA Technical Rules

Summary Form

Club Name in Fu	ıll:			ASA Abbrevi	ation:	
Club Contact:						
Address:						
Email (please supply	<i>(</i>):					
Electronic File Date	2 Sent:					
No. of Indvidual Entry Forms Enclosed:						
Total of entry f	£					
Fee for Coaches		2 per day to incl	ude Refreshr	nents, pleas	e indica	ıte
Sat 6 th May:	•	Sun 7th May:		Fee enclosed:	£	
Please note that I	nolders of a Coa	ich Pass are requir	red to be ASA	registered (and DBS	approved
Total amount enclosed (cheques payable to WSSC) £ or						
BACS payment to	the following	A/C:-				
West Suffolk Sw	imming Club Gal	a Account				
Sort Code 20-16-	12					
A/C No: 10106593	3					

Completed entry forms, and cheque/payment advice should be sent to:

Tina Hudson (Promoter) tina@huntandcoady.com