

WATFORD SWIMMING CLUB OFFICIALS EXPENSES CLAIM FORM

Thank you for officiating at our meet

NAME			
ADDRESS			
PHONE NUMBER			
EMAIL ADDRESS			
BACS DETAILS	SORT CODE	ACCOUNT NUMBER	
SESSIONS OFFICIATED			
MILES @ 45P PER MIL	E (no swimmer)		
MILES @ 15P PER MIL	E (swimmer)		
SIGNED			