**SUMMARY SHEET & DECLARATION**

**Forres Bluefins Swimming Club – 2 Day Meet**

**Saturday 22nd & Sunday 23rd March 2025**

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| **Club Name:** |  |
| **Club Contact Name:** |  |
| **Contact Number:** |  |
| **Contact Email:** |  |

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| --- | --- | --- | --- |
| **Total Entries** | **No. Individual Female** **Entries =** | **@ £8.00 per event** |  **Total £** |
| **No. Individual Male** **Entries =** | **@ £8.00 per event** |  **Total £** |
| **No. 4 x 50m Mixed Relay** **Team Entries =**  | **@ £10.00 per team** |  **Total £** |
| **No. 4 x 50m Mixed IM Relay****Team Entries =**  | **@ £10.00 per team**  |  **Total £**  |
| **Coaches Meals (Day 1)**  | **No. Passes =**  |  **@ £8.00 per head** |  **Total £** |
| **Coaches Meals (Day 2)**  | **No. Passes =**  | **@ £8.00 per head**  |  **Total £** |
| **TOTAL ENCLOSED PAYABLE TO FORRES BLUEFINS** |  **Total £** |
| **ONLINE PAYMENT SHOULD BE MADE VIA BACS TO:** **A/C NUMBER: 00349885 SORT CODE: 80-06-81****Quote Payment Reference: FB2DAY2025 followed by Club Name/Code** |

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| **In Case of Refunds –** please supply the following information:  |
| **Account Name:** | **Account Number:** | **Account Sort Code:** |
|  |  |  |

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| --- | --- |
| **DECLARATION** | *I confirm that all swimmers entered in this competition have paid their current SASA membership fees and parents have been made aware of photographic restrictions at the venue.**I confirm that all coaches and/or team staff from our club who will be on poolside are members of Scottish Swimming and have current PVG disclosure.* |
| **Signature:** | **Position in Club:** | **Date:**  |
|  |  |  |

Form to be returned with entries files to: Match Secretary at matchsec@forresbluefins.co.uk

**CLOSING DATE: ALL ENTRIES, SUMMARY SHEET AND FEES TO BE SUBMITTED BY 5.00pm, Friday 21st February 2025**