

Last Chance County Chaser Level 3 SC Open Gala

Saturday 3.4 & Sunday 4.4 January 2026 @ Tunbridge Wells Sports Centre, TN4 91X							
Individual Entry Form							
Swimmers Name					Male/Female		
Address							
D ((D: ()					104/40/06	200	
Date of Birth						Age at 31/12/2026	
Club					ASA Number		
Email					Telephone		
Event		Event Number	er		Entry Time SC/I		
50m Freestyle					,		
100m Freestyle							
200m Freestyle							
400m Freestyle							
50m Backstroke							
100m Backstrok	e						
200m Backstrok	e						
50m Butterfly							
100m Butterfly							
200m Butterfly							
50m Breaststrok	е						
100m Breaststro	ke						
200m Breaststro	ke						
200m IM							
400m IM							
Total Number of Events							
All invoice will be sent for payment once all accepted entires have been confirmed							
Please accept my entries for the events indicated above. The time indicated against each event							
has been achieved. I declare that the details entered in this form are correct, that I am an eligible competitor in accordance with the ASA Laws and that I agree to abide by the meet conditions.							
Competitor in accordance with the ACA Laws and that I agree to ablue by the meet conditions.							
Parent/Guardian Signature							
Entries must be received by the closing date : 14 th December 2025							

Email: james.martin-young@rtwmonson.org Club website: www.rtwmonson.org/openmeet