

# West District Swimming Committee

## District Regional Programme

### Swimmers Profile 2019

NAME:	CLUB:
DoB:	SASA ID:
COACH:	
FAVOURITE MEET:	
No 1 EVENT:	
No 2 EVENT:	
No 1 STROKE:	
No 2 STROKE:	
MOST RECENT PB:	
MAJOR ACHIEVEMENT IN SWIMMING:	
FUTURE AMBITION IN SWIMMING:	
HAVE YOU BEEN A MEMBER OF DRP SQUAD BEFORE? YES/NO IF SO WHEN?	
Name of Club Coach attending DRP*: Contact Email address:	

Signed \_\_\_\_\_

Date \_\_\_\_\_

\*If known – do not delay returning this Form if name unknown.