**West District LC May AG Meet**

**Dollan Aqua Centre: 11/12th May 2024**

**Summary Entry Form**

***\*\* This form must be completed and returned with any entries. \*\****

 Club Name: ................…...........……………………………………………………............

Contact Name: .......………………………………………………….....................................

Address: …….............................………………………………………………….........

Post Code: ...............................…………..................

 Telephone: ...................................…………..............

Email: ................................…………………………………………………...............

Total Female Entries: ……… @ £8.00 each: = £.....……….....

 Total Male Entries: ……… @ £8.00 each: = £.....……….....

Total Amount Enclosed: = £....………......

Signed: ................…………………….....................

 Position in club: ....................………………………………………….................

**\*\*\*\* Payment for Entries by BACS Transfer ONLY \*\*\*\***

**BACS Transfer:** **Bank of Scotland**

**Account No: 00827834**

 **Sort Code: 80-06-64**

**Identify As: 24WDLCMAYAG-*ClubCode***

***e.g.* 24WDLCMAYAG-WAMX**

Include proof of transfer with this form.

 Email this form, along with Entry File and Proof of BACS Payment to:

**entries@scotswimwest.co.uk**

**no later 8.00pm on Wednesday 24th April 2024**