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:	elephone:						
Email:							
Total Female Entri	ies:		@ £8.00	each:	=	£	
Total Male Entries	5:		@ £8.00	each:	=	£	
Total Amount Enc	losed:				=	£	
Signed:							
Position in club:							
**** Payment for Entries by BACS Transfer ONLY ****							
BACS Transfer:		Account Sort Coc	le:	00827834 80-06-64	AVAG_ClubCod	a	
Identify As: 24WDLCMAYAG- <i>ClubCode</i> e.g. 24WDLCMAYAG-WAM)							
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