**SUMMARY SHEET & DECLARATION**

**All competitors must be SASA registered. Swimmers & coaches have been made aware of the**

**photographic / video restrictions at this venue.**

|  |  |
| --- | --- |
| **Club:** |  |
| **Contact Name:** |  |
| **Address:**  |  |
| **Post Code:** |  |
| **Tel. No:** |  |
| **Email:** |  |

|  |  |  |
| --- | --- | --- |
| **Category** | **No. of Entries** | **Total Cost** |
| **Individual Girl swims @ £7.00** |  |  |
| **Individual Boy swims @ £7.00** |  |  |
| **Relay teams @ £9.00** |  |  |
| **Coaches Meal Tickets £9.00** |  |  |
| **TOTAL ENCLOSED PAYABLE TO FORRES BLUEFINS** |  |

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

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| **DECLARATION:****I confirm that all swimmers entered have paid their current SASA membership fees.****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.** **Signed ………………………………………………..****Position in club …………………………………….. Date: ………………………………** |

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

**CLOSING DATE: ALL ENTRIES, SUMMARY SHEET AND FEES**

**TO BE SUBMITTED BY 5.00pm, Friday 29th August 2025**

**OFFICALS SHEET**

|  |  |  |  |
| --- | --- | --- | --- |
| **Club:** |  | **Phone No:** |  |
| **STO Contact Name:** |  | **Email address:** |  |

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| --- | --- | --- | --- | --- | --- | --- |
|  | **Name** | **Duty (TK/J1/J2)** | **Session 1** | **Session 2** |  | **Mentoring Request\*\*\* J1/J2/J2S** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |

**(\*\*\*Please note mentoring requests will be at the discretion of the Referee\*\*\*)**

**Please return along with entries or email to** **matchsec@forresbluefins.co.uk**

**CLOSING DATE: ALL ENTRIES, SUMMARY SHEET AND FEES**

**TO BE SUBMITTED BY 5.00pm, Friday 29th AUGUST 2025**