

**CHESHIRE COUNTY W.P. & SWIMMING ASSOCIATION**  
**(Affiliated to NWASA)**

**SUMMARY OF ENTRIES**

**CLUB.....**

**CONTACT NAME .....**

**TEL.NO. and/or E MAIL ADDRESS.....**

**(Please include a SAE with return of entries)**

		<b>No. of entries</b>	<b>Amount</b>
<b>Individuals</b>	<b>Male</b>	.....	.....
	<b>Female</b>	.....	.....
<b>Relays</b>	<b>Male</b>	.....	.....
	<b>Female</b>	.....	.....
<b>Coaches Pass</b>	<b>£15.00 each</b>	.....	.....
<b>TOTAL</b>		-----	-----

(Please remember to enclose a SAE for return of information)