



# Cheshire County WP & SA

## 2025 County and Age Group Swimming Championships



### TEAM DECLARATION FORM

Club: \_\_\_\_\_

Event No. \_\_\_\_\_

Age Group \_\_\_\_\_

**Open/Male / Female / Mixed** (*strike out as not applicable*)

#### MEDLEY

Stroke	Swimmer Name	SE No.	Y.O.B
Backstroke		*	
Breaststroke		*	
Butterfly		*	
Freestyle		*	

Event No. \_\_\_\_\_

Age Group \_\_\_\_\_

**Open/Male / Female / Mixed** (*strike out as not applicable*)

#### FREESTYLE / CANNON

Swim Order	Swimmer Name	SE No.	Y.O.B.
1		*	
2		*	
3		*	
4		*	
<b>Cannon Only</b>			
5		*	
6		*	
7		*	
8		*	

Submitted by \_\_\_\_\_  
*Print Name*

Time: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*Information not required if already on submitted Team list