**Swim England South West Region**

 **SHORT COURSE (25m) MASTERS’ MEET 2020 (Open)
Millfield School Street Somerset on SUNDAY 27TH SEPTEMBER 2020**

NAME…………………………………………………………………………………………………………………………... MALE FEMALE

DATE OF BIRTH………………………………………….. ASA NUMBER……………………………………..

ADDRESS………………………………………………………….…………………………………………………………………………………………………………..

………………………………………………………………POSTCODE……………………………………….

E-MAIL….........................................................................

CLUB………………………………………………………………………………….. SIGNATURE……………………………………………………………….…

WARM UP: 12.00pm

START: 12.40pm

FINISH: 5.00pm

ORDER OF EVENTS: 100m IM, 400m Free, 100m Breast, 50m Back, 200m Fly, 200m Breast, 50m Free, 100m Back.

SHORT BREAK – length depends upon number of competitors.

ORDER OF EVENTS: 200m IM, 100 Free, 50m Fly, 200m Back, 50m Breast, 100m Fly, 200m Free.

**MEDALS: There will be one set of medals for each of the events which will be swam as an OPEN Age Group and the medals will be awarded to the top 3 points winners using the FINA points adjusted by the Rowson formulae as is used in the Decathlon Competition.**

AGE GROUP: OPEN Swimmers must be 18+ on the 27 September 2020

 Age as at the 31 December 2020.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Distance | Stroke | Time | Distance | Stroke | Time |
| 50m | Freestyle |  | 50m | Breaststroke |  |
| 100m | Freestyle |  | 100m | Breaststroke |  |
| 200m  | Freestyle |  | 200m | Breaststroke |  |
| 400m  | Freestyle |  | 50m | Butterfly |  |
| 50m | Backstroke |  | 100m | Butterfly |  |
| 100m | Backstroke |  | 200m | Butterfly |  |
| 200m | Backstroke |  | 100m/200m | Ind. Medley |  / |
|  |  |  |  |  |  |

ENTRY FEES FOR NUMBER OF SWIMS: (Maximum is 6)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 |  |  |
| £7.50 | £15.00 | £22.50 | £30.00 | £37.50 | £45.00 |  |  |

Entries Close on Monday 14TH September 2020.

I enclose cheque for £…………….or by BACS to Lloyds Bank, 30-90-54 a/c 04630209 and use reference MASTERS- YOUR SURNAME

BACS amount £ ………… reference …………………………………………

Please send this form together with your cheque made payable to **ASASWR** to:

Chris Vickery, Swim England SW Regional Office, Chelston Business Park, Castle Road, Wellington TA21 9JQ.

T 01823 666792

Email: swentries@swimming.org

An entry list will be sent to you by e-mail or, if you do not have e-mail, please enclose a stamped addressed envelope.