

Brantford Aquatic Club – Masters Sprint Splash

Saturday, October 16, 2004 – 5:15 – 9:00 pm

HYPERLINK <http://csca.org/Brant/Top.htm>

Individual Entry Form

Name _____ Gender: M / F

Address _____

City _____ Prov/State ____ Postal Code _____

Telephone (H) _____ (W) _____

E-Mail _____

Age as of Dec 31, 2004 _____

Birthday (dd/mm/yyyy) _____ Team _ _ _ _ Masters Swim # _____

Signature _____ Date _____

At \$25.00 per swimmer = \$ _____ included with entry (cheque or VISA)

Visa # _____, Expiry Date _____, Name on Card _____

Individual Master's Meet Entry Form - Warm Up at 5:15 p.m. Start at 6:00 p.m.

No.	Event	Time	No.	Event	Time
1	25 FLY		7	50 FLY	
2	50 BK		8	25 BK	
3	25 FR		9	50 FR	
4	50 BR		10	25 BR	
5	100 FR		11	200 FREE	
6	200 IM Relay		12	200 FREE Relay	

Mail entries to:

Michael Puckering

10 Rollingwood Cres.

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Phone: 519-756-3297