

LIONS CLUB



of BRIDPORT

DORSET



ENGLAND

Registered Charity No. 1023128

SWIMARATHON – 2009 APPLICATION FORM Sunday 4th October 2009

From:(Name of Organisation, Club, School etc.)

Address:.....

Age group entered **JUNIOR - SENIOR – MIXED - PUBS** (Please delete as appropriate)
JUNIOR CLASS MUST BE UNDER 14 ON THE 4/10/2009

We wish to enter in your **SWIMARATHON** to be held at Bridport Leisure Centre
on **Sunday 4th October 2009 10:00am to 5:00pm**

NAME OF TEAM: _____	Age at 4/10/2009 if JUNIOR
TEAM CAPTAIN (NON SWIMMER)	
SWIMMER 1:	
SWIMMER 2:	
SWIMMER 3:	
SWIMMER 4:	
SWIMMER 5:	
SWIMMER 6:	

If further Sponsorship forms are required please photo copy as required

Home Tel No: _____ Business Tel No: _____

Please specify any times when your team is unable to swim. Your allocated time will be advised during the week prior to the event.

Teams will commence swimming on the hour - first swim at 10:00am.

Teams are required to hand in their sponsorship forms at the pool side 30 minutes prior to the time they are due to start swimming.

Team Captain contact address:

Signed: _____ (Team Captain) Date: _____

Please enclose entry fee of **£10** per team with this application.
Cheques made payable to **Bridport Lions Club Swimarathon Fund.**

Return form to: Lion Peter Garlick, 6 Uplands, Walditch, Bridport, Dorset DT6 4LE Tel: 01308 424536

APPLICATION FORMS MUST BE RETURNED BY 23rd September 2009