**County Championship and Age Group Competitions 2019**

**Annual coaches’ passes and poolside assistants application form**

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| **Club** |  |

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| **No. of annual Coaches passes @£20** | **(Max 4)** | **Payment to:** | **Sort Code 40-23-03**  **Acc. No. 61770071** |

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| --- | --- | --- | --- |
| **Name of person**  **COACHES** | **DBS number and date of issue** | **Name of person** | **DBS number and date of issue** |
| 1. |  | **Poolside Marshalls (if hosting) Free of charge** |  |
| 2. |  | 1. |  |
| 3. |  | 2. |  |
| 4. |  |  |  |
|  |  |  |  |
| **POOLSIDE ASSISTANTS**  **Free of charge** |  |  |  |
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I hereby declare that these particulars are correct and that I am the nominated County Swimming Representative for this club

**SIGNATURE OF NOMINATED CLUB REP: DATE: No more than 4 Coaches passes to be purchased per club Please return from to County Welfare Officer** [**mross.berrycottage@btinternet.com**](mailto:mross.berrycottage@btinternet.com) **Pay with club entries via BACS to Worcester County S.A. Account – details above**