**County Championship and All Age Group Competitions 2019**

**Annual coaches’ passes application form**

|  |  |
| --- | --- |
| **Club** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **No. of annual passes @£15** | **(Max 8)** | **Amount enclosed** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of person** | **DBS number and date** | **Name of person** | **DBS number and date** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I hereby declare that the a above is correct and that I am the nominated County Swimming Representative for this club

**SIGNATURE OF NOMINATED CLUB REP: Date: / /2019**

**No more than 8 passes to be purchased per club without discussion with County Welfare Officer**

**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**