All swimmers wishing to be considered for selection should complete this form and return it to Sarah Kennedy, British Swimming Administration Officer by:

* no later than **10th April 2015 for consideration for the pool team**
* no later than **30th April 2015 for consideration for the open water team**

Completion of this form is by no means any guarantee of selection. Swimmers completing this form are asked to read the selection policy for the event in full before submitting.

|  |  |
| --- | --- |
| **Name** | Click here to enter text. |
| **Date of birth** | Click here to enter text. |
| **Address** | Click here to enter text. |
| **Email contact** | Click here to enter text. |
| **Phone contact** | Click here to enter text. |
| **University, course, year of study** | Click here to enter text. |
| **Main event (pool swimmers)** | Click here to enter text. |
| **Club** | Click here to enter text. |

Please tick the box to indicate you understand the selection policy and eligibility criteria

|  |  |
| --- | --- |
| **I have read and fully understood all aspects of the Selection Policy, and acknowledge that failure to comply with any of the Selection Policy conditions could result in my non-selection or withdrawal from the selected team.** | Click here to enter text. |
| **I have read and understood the BUCS eligibility criteria for the event.** | Click here to enter text. |

Please return this form **the specified date** to:

**Sarah Kennedy, British Swimming Administration Officer**

Via email to: sarah.kennedy@swimming.org or Via post to: Sarah Kennedy, British Swimming, SportPark, Pavilion 3, 3 Oakwood Drive, Loughborough University, LE11 3QF