

APPLICATION FORM – DEVON TOUR

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| FULL NAME | | |
| DOB | | |
| AGE (at 31 st December on year of tour) | | |
| EMAIL ADDRESS | | |
| PHONE NUMBER | | |
| ELIGABILITY | Have you been on the tour before? YES/NO | Date joined club: Current Squad: |

Please return this form to the club night desk before **30th November 2010**.

I declare that the above information is true.

Signed:

(Swimmer)

(Parent/Guardian)