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2017 COACH & TEAM MANAGERS PASS APPLICATION FORM

OPEN MEET 2017

- This pass is only for coaches and authorised Club team managers and representatives and is not transferable.
- Applicants must be members of the ASA/IOS.
- The pass authorises the holder to be on pool side during warm-up and swim-down and be in areas designated for swimmers during the gala.
- The pass <u>must</u> be visibly worn at all times.
- The pass will be issued with a lanyard.
- This form must be countersigned by an ASA-registered appointed Club Officer.

The pass for this meet is a "Standard Coach Pass" which covers the 2017 Open Meet only. The pass for the whole weekend costs £16.00. A pass for one day costs £8.00. For this, the holder will be entitled to entry onto poolside for all sessions and a programme and a set of heat sheets for each event.

Applications <u>must</u> be received at least five days before the competition. Late applications will not be processed.

Passes <u>will not</u> be posted and must be collected from the coaches desk at the entrance to the LAC (top level) on the morning of the first day.

Please apply using the following procedure;

- 1. Complete and save the form on the next page,
- 2. Obtain/scan a clear electronic image of the applicant (passport-style/head and shoulders),
- 3. Attach both the saved form and the image to an email and send to Jeanette Edmiston at jeanetteedmiston@btinternet.com.
- 4. Send immediate BACS/online payment to London Swimming using the following details:

o Sort Code: 40-20-09o Account number: 41469932

o Payment reference: CPASS+_[CLUB CODE]

Coaches from London Clubs that have an annual pass do not need to apply for a separate pass for this event.

If you have any queries, Jeanette can be contacted using the email address above.



APPLICATION

Type of Pass	Tick
STANDARD OPEN MEET COACH PASS FOR 2017	
WHOLE WEEKEND @ £16.00	
STANDARD OPEN MEET COACH PASS FOR 2017	
ONE DAY ONLY (please specify which day)@ £8.00	
CONFIRMATION OF PAYMENT SENT	

APPLICANT DETAILS		
FULL NAME		
ASA/IOS NUMBER		
POSTAL ADDRESS		
POSTCODE		
PREFERRED TELEPHONE NUMBER		
EMAIL ADDRESS		
CLUB		
BY SIGNING THIS FORM, I CONFIRM THAT THE INFORMATION GIVEN ABOVE IS BOTH CURRENT AND ACCURATE		
SIGNED	DATE	

It is an ASA requirement that we confirm DBS checks have been made.

CLUB COUNTERSIGNATORY		
FULL NAME		
CLUB ROLE		
ASA NUMBER		
CLUB		
BY SIGNING THIS FORM, I CONFIRM THAT THE COACH/TEAM MANAGER APPLYING FOR THIS PASS HAS		
PROVIDED CORRECT INFORMATION; HAS A CURRENT ENHANCED DBS CERTIFICATE; AND WILL BE		
ATTENDING THIS EVENT AS AN OFFICIAL REPRESENTATIVE OF OUR CLUB.		
SIGNED	DATE	