



ENTRY FORM

(Please return by 28th December 2019)

Association _____

Contact Person _____ Contact Number _____

Email Address _____

Team Entries

Last Name	First Name	Birthdate	M/F	1M	3M	Plat- form	A/B 1M	A/B 3M	A/B Plat- form

List of Officials (Coach, Team Manager, Medical Assistant, etc.)

S/N	Name	M	F	Designation
1				
2				
3				
4				
5				

Signature _____

Stamp _____

Date _____

Submit via Email to: diving@swiss-swimming.ch until December 28, 2019