**Entry Form Att.4**

#### HEAD to Head Diving Autumn Meet 2017

#### Girls/Ladies

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name** | **Year of birth** | **D** **1m** | **D** **3m** | **C 1m** | **C 3m** | **C** **Plat- form** | **B****1m** | **B 3m** | **B Plat-form** | **Int 3 m** | **Int Plat-form** | **Masters** |
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#### Boys/Men

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| **Name** | **Year of birth** | **D****1m** | **D****3m** | **C 1m** | **C 3m** | **C** **Plat- form** | **B****1m** | **B 3m** | **B Plat-form** | **Int 3 m** | **Int Plat-form** | **Masters** |
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#### Syncronized diving girls:

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| **Te** | **Dive** |
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#### Syncronized diving boys:

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| **Tm** | **Dive** |
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**Meals:**

Please enter how many meals your team wish to book each day

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Friday 27/10** | **Saturday 28/10** | **Sunday 30/10** |
| **Lunches** |  |  |  |
| **Dinners** |  |  |  |

Team name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coaches names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Judges names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Send to:** **info@polisensimhopp.se** **No later than October 6 2017**

**Welcome to**

**HEAD to Head Autumn Meet**

**2017**

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