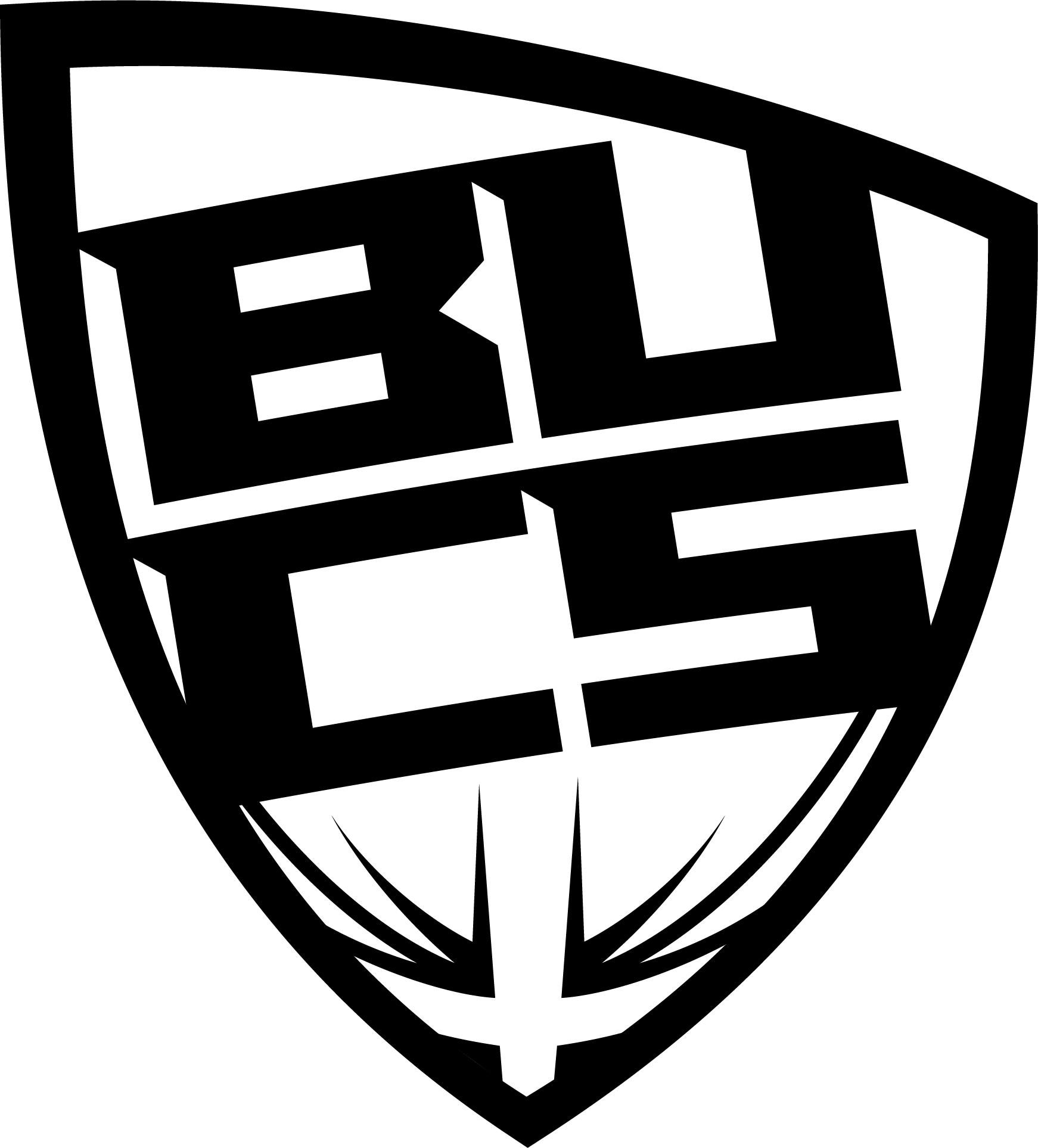
BUCS SWIMMING CHAMPIONSHIPS



HEATS WITHDRAWAL FORM

# INSTITUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I confirm that I wish to withdraw the following swimmers from the events listed:

Please note that Event Numbers relate to those in the official programme.

**Sessions: (1) Fri Evening (2) Sat Morning (3) Sat Afternoon (5) Sun Morning**

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| --- | --- | --- | --- | --- |
| **Name** | Session | **Event No** | **Event Name** | **Reason / Notes** |
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***Please note that once withdrawn these swimmers may not be re-entered***

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position with Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date & Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_