**BUCS Swimming Long Course Championships 2025**

**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.

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| **Name** | **Session** | **Event No** | **Event Name** | **Reason / Notes** |
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**Sessions: (1) Friday AM/PM (3) Saturday AM/PM (5) Sunday AM/PM**

 ***Please note that once withdrawn these swimmers may not be re-entered.***

Signed:

Position with team:

Date: Time: