



APPLICATION FORM

Please make sure you have read the qualifying criteria to enable you to complete this form in full.

Name of Applicant:

Club:

Date of Birth:/...../.....

Age as at 31 December 2018:

WHICH SQUAD ARE YOU APPLYING FOR (please circle one)

PATHWAY

POTENTIAL

TAPS

Please tick if you are applying for Open Water selection

MEET DETAILS	STROKE	DISTANCE	TIME <small>*SC times to be converted to LC</small>	FINA POINTS

Signed:

Verified by:
(Coach)

You can complete this application form as soon as you have met the qualifying criteria for either the Pathway, Potential or TAPs squads. Please email this completed form, along with a recent photograph of yourself, to cherie@swimmingwaikato.co.nz. **The cut-off date for applying for a position on a 2019 squad is 31 December 2018.**