Northamptonshire
Amateur Swimming Association

(Affiliated to Swim England East Midlands Region)

CLUB DETAILS:

CLUB:

NAME & ADDRESS:
(Secretary or Treasurer)

Please list all additional funding applied for by the Club for this course:

Please advise Club's contribution for this course:

We confirm that our Club is SwimMark accredited.
We confirm that our Club has agreed to accept the grant as applied for by the Candidate.
We agree to ensure that the grant is used solely for the purpose for which it was granted and that the grant will be shown separately in the Club's accounts. We confirm that the Candidate is still a member of our Club and that the details submitted on the Candidate's form are correct to the best of our knowledge.

Name & Office of Club's signatory:

Signature:

Date: