WARWICKSHIRE AMATEUR SWIMMING ASSOCIATION
COUNTY CENTENARY SCHOLARSHIPS

Application Form

A letter of endorsement from your coach, explaining how the application will assist your development and commitment, must accompany this form.

Application Date:			
Swimmers Name:			
Swim England Number:		**Date of Birth:**	
Address:			
Contact Name:			
Contact Email:		**Telephone No:**	
Club:			

Supporting Information: (Use an additional sheet if necessary, including details of any representative honours)

Please provide details of estimated expenditure:	
Equipment:	
Travel:	
Training/Coaching:	
Total Amount (£)	

Detail any other assistance received or applied for: (E.g. Sports Aid Foundation, Swim England, Regional Grants, etc.)

I agree the information provided can be used to support my application for 'Warwickshire ASA - County Centenary Scholarship Award.'

Signed: _____ **Date:** _____

For further information, and completed applications forms:

secretary@warwickshireasa.co.uk

Closing date for applications: 31st December