



Masters Swimming Victoria State Long Course or Short Course Championships

INDIVIDUAL ENTRY FORM

(Do not use this entry form for long distance meets)

- Please complete this Individual Entry form clearly and accurately and hand it, with your entry fee, to your Club Secretary.
- Your Club Secretary will produce a Summary Sheet from these Individual Entry Forms.
- You **must be financial with the State Branch** in order to swim
- You must have entered at least one individual event to compete in a relay team for your Club
- **All Details** to be completed. **Incomplete forms will be returned unprocessed.**

Meet Name and Year				E.g. Short Course 2008
AUSSI Number				
Surname			First Name	
Gender	M / F (circle)		Age (as at 31/12)	
Date of Birth	/ /		Age group	-
Club Code		Club Name		
Medical Disability	Yes / No (You must have this already registered with your Branch)			

<u>Emergency Contact during the Meet</u>			
Name			Contact Telephone

Registration Fee	@ \$ 15.00	\$ 15.00
Entry per Event (max 5)	<u>Number of Events:</u>	@ \$ 5.00
Total enclosed (Payable to your Club)		

ENTRY DETAILS – STATE LONG COURSE OR SHORT COURSE CHAMPIONSHIPS

- Make sure your events are listed clearly and in order
- Times must be submitted. **No time - No entry.**
- There is a maximum of five (5) individual events
- Do not enter relay events on this sheet (will be completed by your Club Secretary)
- All details to be completed, correct and the declaration (below) to be signed

Event No.	Distance	Stroke	Nominated Time
<i>Example</i>			
7	200m	Individual Medley	<u>0</u> <u>3</u> : <u>4</u> <u>5</u> . <u>5</u> <u>0</u>

Declaration

I the undersigned, in consideration of and as a condition of my entry in the Masters Swimming Victoria State Championships for myself, heirs, executors and administrators hereby waive all and any claim, right or cause of action which I or they may otherwise have for or arising out of my life or injury damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon my entry or participation in the said event and admit that I participate in the event solely at my own risk. The waiver release and discharge shall be and operate separately in favour of all persons, corporations and bodies involved or otherwise engaged in promoting or staging the event and the servants agents, representatives and officers of them and includes but is not limited to AUSSI Masters Swimming Victoria Branch Incorporated, medical and paramedical personnel, police officers and so shall operate whether or not the loss or injury is attributable to the act or neglect of any or more of them. I also declare this to be my entry, the above numbers as being for the events in which I wish to participate.

Signed _____ Date ____ / ____ / ____ Telephone Number _____