

## 2020 SWIMMING NEW SOUTH WALES MULTI-CLASS ANNUAL CHAMPIONSHIPS



## **LONG COURSE**

**DATE:** Saturday October 17, 2020

TIME: 8:00am Registration - 9:00am Start

VENUE: Sydney Olympic Park Aquatic Centre,

CLOSING DATE: 5pm Tuesday October 6, 2020 NO LATE ENTRIES WILL BE ACCEPTED

First Name:	me:		
Address:		Post Code:	
Sex (Circle): F / M	Date of Birth:	Age at Date of this Event: yrs	
Phone: (H)	(M)		
Email:			
Club/Association you a	re representing (Ryde Swimming	g Club, CPSARA etc):	
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LASSIFICATION: Amp/CP/WC	Please use numbers for classification in the bo	or the relevant I have not been classifie	

## **ENTRY FEES:**

Entry fee is: \$10.00 per event. You may enter a maximum of 5 events.

PLEASE TICK THE EVENTS BELOW THAT YOU WISH TO ENTER AND FILL IN YOUR BEST ENTRY TIME

<b>Event Numbers</b>		Event Description	Entry Time
Boys	Girls		
	□ 2	400m Freestyle - QT 10:00.00	
□ 3	<b>4</b>	50m Freestyle	
□ 5	□ 6	100m Breaststroke	
□ 7	<b>8</b>	200m Backstroke - QT 4:30.00	
□ 9	<b>10</b>	100m Freestyle	
□ 11	<b>12</b>	50m Butterfly	
☐ 13	<b>14</b>	200m Freestyle - QT 4:30.00	
☐ 15	<b>16</b>	50m Backstroke	
□ 17	<b>18</b>	200m Breaststroke - QT 4:30.00	
<b>19</b>	<b>20</b>	100m Butterfly	
<b>1</b> 21	<b>22</b>	50m Breaststroke	
<b>23</b>	<b>24</b>	100m Backstroke	
<b>25</b>	<b>26</b>	200m Butterfly - QT 4:30.00	
<b>27</b>	<b>28</b>	150m IM	
<b>29</b>	<b>30</b>	200m IM	

MEDICAL DETAILS	
Medicare Number:	
Emergency Contact Name:	Phone:
Medication (Type & Dosage):	
Do you have any allergies?	
Please provide a full description of your disability:	
<ul> <li>of any subsequent medication requirements</li> <li>In the event of an emergency I hereby permiseek medical attention for me.</li> <li>I agree to allow Swimming NSW and Conchild's/my ward's name and any photograpromotion of services and initiatives.</li> </ul>	the co-ordinators of Swimming NSW Swim Meet to numerities NSW - Sport and Recreation to use my phy of me/my child/my ward at this event for the entry form can be forwarded to my Association/Club
PLEASE FORWARD THIS ENTRY FORM WITH Y	OUR FEE ATTACHED BY THE CLOSING DATE
I am paying by:   Cheque   Money Order	PLEASE SEND ENTRIES VIA:
Please make cheques/money orders payable to:	Post: Swimming NSW
Swimming NSW Ltd.	PO Box 571
I am paying by:  Direct Debit	SYDNEY MARKETS NSW 2129
Swimming NSW Ltd.	Email:
<ul><li>Commonwealth Bank</li><li>BSB: 062-172</li></ul>	greta.brodie@nsw.swimming.org.au
BSB: 062-172     Account Number: 1028 3026	All enquiries -
<ul> <li>Description: MC Champs 20 (and your name)</li> </ul>	
	• Email:
** NO CASH IS TO BE FOWARDED BY MAIL **	greta.brodie@nsw.swimming.org.au

- 4. Withdrawals No refund given.
  - Withdrawal from an event(s) must be communicated to the registration desk on arrival or
- to the marshalling desk during the meet at least 2 events in advance of the withdrawal.

  5. **S11 Swimmers** are required to wear blacked-in goggles for all events and to be tapped at the end of the pool.
- 6. Swimming NSW Rules apply