



TUGGERANONG TRIFECTA Postal Swim July-August 2024



Sanctioned by Masters Swimming Australia
Sanction No: PS 04/2024

Three swims, each in a different stroke: 400m, 800m, 1500m

Entry fee: \$18 per swimmer

Welcome to Tuggeranong Masters Swimming ACT's postal swim!

This one will warm you up. Just the thing for those wintry days!
Double dip - a postal swim for you, and some
Endurance 1000 points for your club.

All 2024 participants will receive our fabulous navy blue wet bag to keep your wet gear or your dry gear separate in your swim bag as well as a certificate.

If you did not secure a wet bag in 2022 or 2023, now is your last chance to swim for one, or swim to add another to your swim gear collection!



Entry Conditions

All three swims must be completed **between 1 July 2024 and 31 August 2024**.

You do not have to complete all swims in one day.

Each swim must be in a different stroke, and individual medley is allowed for 400m or 800m.

Swims may be completed in either a 25m or 50m pool.

Only one entry per swimmer.

Entries must be signed by a club official, e.g. secretary, president, recorder.

Entries must be postmarked/sent no later than **Sunday, 15 September 2024**.

Swimmers must be financial members of Masters Swimming Australia, or of their own country's official masters swimming national body.

Please send all entries from one club together via your club coordinator.

Send entries electronically by email to: postal-vikings@googlegroups.com

Payment by bank transfer to: Tuggeranong Masters Swimming ACT

St George Bank BSB 112-908 Account Number 484 809 534



Entry Form for Tuggeranong Trifecta 2024

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Please sign the participant agreement before attempting any of the swims:

I understand that I should not participate in this event unless I have an appropriate level of fitness and training. I verify that I am aware of the risks involved, and that I am sufficiently fit to take part in this event. I will not hold Tuggeranong Masters Swimming ACT responsible for any injury or illness sustained as a result of taking part in this postal swim. I also accept full responsibility for any costs incurred.

Swimmer's signature: _____

Name _____

Registration Number _____ Male/Female _____ Age Group _____ to _____

E-mail Address _____

Club Name _____ Club Code _____

Club Postal Address: _____

Swims

Distance	Stroke	Pool	Time	Date	Timekeeper
400m	FR BA BR BU IM	25m / 50m	: :		
800m	FR BA BR BU IM	25m / 50m	: :		
1500m	FR BA BR BU	25m / 50m	: :		

Club Official

Signature _____

Position _____

Date _____