

# OFFICIAL ENTRY FORM

## WESTS AUBURN MASTERS 5000m TURTLE SWIM 2024

Sanctioned by Masters Swimming in Australia Inc., Sanction Number 01/2024

NAME (Single swimmer or contact person for relay) .....

DATE OF BIRTH ..... AGE ..... SEX M / F

ADDRESS (FOR SENDING CERTIFICATES).....

..... STATE ..... POSTCODE .....

PHONE NUMBER (CLUB CONTACT) ( ... ) ..... / mobile .....

EMAIL ..... @ .....

CLUB NAME ..... CLUB CODE .....

MEMBER NUMBER ..... 1 JANUARY – 30 APRIL 2024

DATE OF SWIM ..... POOL LENGTH 25m / 50m

### INDIVIDUAL ENTRY

Please tick the swim style chosen, and enter your time (in mins / secs / hundredths).

FREESTYLE

BREASTSTROKE TIME ..... mins ..... seconds.

BACKSTROKE eg 123 mins 56 . 05 seconds

4 x 1250m I/M

### TEAM ENTRY (FREESTYLE RELAY OR MEDLEY RELAY)

Please tick your choice of relay, and enter the total time (in mins / secs / hundredths).

2 x 2500m

4 x 1250m

5 x 1000m TOTAL TIME ..... mins ..... seconds.

10 x 500m eg 154 mins 8 . 75 seconds

4 x 1250m Medley

### **TEAM MEMBERS:** (please continue on back if needed)

1. Name ..... Age ..... Sex ..... Time .....

2. Name ..... Age ..... Sex ..... Time .....

3. Name ..... Age ..... Sex ..... Time .....

4. Name ..... Age ..... Sex ..... Time .....

5. Name ..... Age ..... Sex ..... Time .....

### **PAYMENT DETAILS:**

\$15 x ..... = \$ ..... Cheque made out to "Wests Auburn Masters"

or DD: **Commonwealth Bank Carlingford, Account 10093355, BSB 062 300**

(noting your *club name* with the deposit)

I attest and verify that I have full knowledge of the risk involved, and am fit and sufficiently trained to participate in this event.

**SIGNATURE/s** ..... **WITNESS** .....