



## **TUGGERANONG TRIFECTA Postal Swim**

**July-August 2025**



Sanctioned by Masters Swimming Australia  
Sanction No: PS 03/2025

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

**Entry fee: \$20 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.



**BRAND NEW AWARD FOR 2025!**

All **2025 participants** will be able to choose to receive one of our fabulous new  
**microfibre towels** (30x80cm) in either **red** or **blue** as well as a **certificate**.

### **Entry Conditions**

All three swims must be completed **between 1 July 2025 and 31 August 2025**.

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, 14 September 2025**.

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](mailto: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 2025

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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 \_\_\_\_\_

Preferred Towel Colour (please indicate) **RED** or **BLUE**

Registration Number \_\_\_\_\_ Male/Female \_\_\_\_\_ Age Group \_\_\_\_\_ to \_\_\_\_\_

E-mail Address \_\_\_\_\_

Club Name \_\_\_\_\_ Club Code \_\_\_\_\_

Club Postal Address: \_\_\_\_\_

## Swim

| 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 \_\_\_\_\_