



**SUDBURY & DISTRICT SWIMMING CLUB**  
 (Affiliated to the ASA East Region & Suffolk County ASA)

**15th Masters and Senior Age Group (16-24) Valentines Open Sprint Meet**

**Held under ASA Laws and Technical Rules**

**Saturday February 13th 2010 AT THE KINGFISHER LEISURE POOL**

**SURNAME:** \_\_\_\_\_ **FIRST NAME:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Please Tick**  **Female**  **Male**

**Address:** \_\_\_\_\_

\_\_\_\_\_ **Post Code:** \_\_\_\_\_

**NAME OF CLUB:** \_\_\_\_\_

**Tel No:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**ASA Reg No:** \_\_\_\_\_

Event No:		EVENT	Please enter a realistic time	Please return the signed and completed form together with a stamped and self addressed envelope to:  BERNIE BUCK 47 Meadow View Road SUDBURY CO10 7NZ
F	M			
1	2	200m FREESTYLE		
3	4	50m BUTTERFLY		
5	6	50M BACKSTROKE		
7	8	100M INDIVIDUAL MEDLEY		
9	10	50M BREASTSTROKE		
11	12	50M FREESTYLE		

**CLOSING DATE FOR ENTRIES - Wednesday January 13th 2010**

**No of Entries** \_\_\_\_\_ **@ £3.50** **£** \_\_\_\_\_ **:** \_\_\_\_\_

**IMPORTANT - PLEASE READ THIS STATEMENT CAREFULLY BEFORE SIGNING.**

- I hereby declare that the particulars supplied are correct and that I am an eligible competitor in accordance with the laws of the Amateur Swimming Association and will abide by the conditions laid down by the Association and SDSC for this competition and be governed by the rules of the Amateur Swimming Association and all other laws and regulations applicable including ASA Safety Laws
- I am aware of the need to seek appropriate medical advice if I have any concerns as to the state of my health. I have not been informed by any medical practitioner and I do not have any knowledge of any medical condition which would make it inadvisable for me to participate in Masters swimming events or any other associated activities. According I hereby certify that I am physically fit and well to participate in any such training and events.
- I am aware of and appreciate the inherent risks involved in such training and competition including the possibilities of injury and accident. I undertake always to conduct myself in a responsible and professional manner.
- I undertake at all times to use my best endeavours to train and compete in a safe and proper manner and do not do anything which would expose myself or fellow swimmers to unnecessary risk of injury.
- I further undertake at all times to take all reasonable safety measures for the protection of myself and fellow swimmers and to inform the Referee of any concerns I may have as regards safety.
- I acknowledge that British Swimming, the Amateur Swimming Association, or any other body affiliated thereto, cannot be held responsible for any loss or damage to personal belongings and that I must take all reasonable steps against such loss or damage.
- I have read or have had read to me the above provisions and declarations and agree to abide by them.

**Signature of Competitor:** \_\_\_\_\_ **Date:** \_\_\_\_\_