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SWIM MEET FORM

(FM-008-SWM-v1.0)

OFFICE USE ONLY

Received On:	
Received By:	

D SWIM ACADEMY SDN BHD 750654-V

9-2, Jalan Radin Bagus 6, Bandar Baru Sri Petaling, 57000 Kuala Lumpur. Contact : 1300 222 372 | Email : info@dswimacademy.com

Event Title	:	Sport Excel Grand Final 2016
Event Date	:	13th - 14th August 2016
Event Location	:	Kompleks Renang Kuala Lumpur, Bandar Tun Razak, Cheras Kuala Lumpur
Entry Closing Date	:	5th July 2016 @ 7:30pm

[A] SWIMMER DETAILS

Full Name : _____

Date of Birth : _____ Gender : M / F Malaysian : YES / NO

Contact No. : _____ Email Address : _____

[B] PARTICIPATING EVENT

Event	Event No.	Best Time	Event	Event No.	Best Time
50m Backstroke			100m Butterfly		
100m Breaststroke			50m Breaststroke		
50m Butterfly			100m Backstroke		
100m Freestyle			50m Freestyle		

[C] TERMS & CONDITION

- 1) Read the rules and regulation and consult the coaches before submitting to DSA administration counter.
- 2) SportExcel Grand Final TOP 24 qualified swimmers for their event(s) only.
- 3) No Charges

By signing this, I hereby declare that all information provided is true and correct and I have read and understand all terms and condition and hereby agreed to pay for the penalty and any charges imposed by the swim meet organizing committee under any circumstances. I had also understand all decision made by **DSA coaches is final.**

Name : _____ Signature : _____ Date : _____

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[E] OFFICE USE ONLY - SWIMMER'S COPY

Received By : _____ Payment Amount : _____

Date : _____ Remark : _____

*Kindly visit www.dsaswimteam.com for more updates