



TEACHING
MORE THAN JUST
Swimming



SWIM MEET FORM

(FM-008-SWM-v2.0)

(OFFICE USE ONLY)	Date PMS Keyed :	By:
	Date Checked :	By:

D SWIM ACADEMY SDN BHD (750654-V) (GST ID No. 001442578432)

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Meet Title :	MILO / PRAKL AGE GROUP SWIMMING CHAMPIONSHIP 2017
Meet Date :	13th January - 15th January 2017
Meet Location :	Kuala Lumpur Swimming Complex, Bandar Tun Razak, Cheras
Entry Closing Date :	4th December 2016 @ 6pm

[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
1500m Freestyle			100m Butterfly		
200m Backstroke			200m Breaststroke		
100m Freestyle			200m Freestyle		
200m Ind. Medley			50m Backstroke		
50m Butterfly			400m Ind. Medley		
800m Freestyle			100m Breaststroke		
100m Backstroke			200m Butterfly		
400m Freestyle			50m Freestyle		
50m Breaststroke			Available for Relay	YES <input type="checkbox"/>	NO <input type="checkbox"/>

[C] TERMS & CONDITION

- 1) Read the rules and regulation and consult the coaches before submitting to DSA administration counter.
- 2) Open to ALL nationalities and DSA Swimming Club members ONLY.
- 3) Penalty may be imposed for each event scratched on the day of the meet unless a medical certificate is furnished.
- 4) No qualifying time applied.

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.

[D] SWIMMER'S & PARENT'S AGREEMENT

[E] COACH'S AGREEMENT

<i>Swimmer Signature</i>		<i>Coach Signature</i>	
Swimmer Full Name :	_____	Coach Name :	_____
Date :	_____	Date :	_____
<i>Parent Signature</i>		[F] OFFICE USE ONLY	
<i>Parent Signature</i>		<i>Admin Signature & Payment Stamp</i>	
Parent Full Name :	_____	Payment Amount :	RM _____
Date :	_____	Date & Time Received :	_____

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[G] OFFICE USE ONLY - SWIMMER'S COPY

Meet Title :	MILO / PRAKL AGE GROUP SWIMMING CHAMPIONSHIP 2017		
Swimmer's Name :	_____	Date and Time Received :	_____
Total No. of Events :	_____	Remark :	_____

**Kindly visit www.dsaswimteam.com for more updates*