

Event No.

*Kindly visit www.dsaswimteam.com for more updates

DSA Swimming Club 5719/2012

9-2, Jalan Radin Bagus 6,
Bandar Baru Sri Petaling, 57000 Kuala Lumpur

Data PMS Kow T: 1300 222 372

E: dsaswimteam@dswimacademy.com

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(511152 552 51121)				
	Date PMS Keyed :	By:		
	Date Checked :	Ву:		

Meet Title	:	36th NATION	NAL INTER-CLU	JB SW	IMMING CHAMPIONSHIPS	2017 FOR THE	PRESIDENT CUP	
Meet Date	:			2	4th - 26th November 2017			
Meet Location : Pusat Akuatik Nasional Kuala Lumpur					sional Kuala Lumnur Sport	s City Bukit Ial	il	
Club Closing Date	· e :		1 doc 7 mac			s city, bakit sai		
Club Closing Date	· .				29th October 2017, 6pm			
[A] SWIMMER D	ETAILS							
Full Name	:							
Date of Birth				Genda	er : M / F M	1alaysian :	YES / NO)
	·					ididysidii .	125 / 110	
Contact No.				Age G	rp : Email :			
[B] PARTICIPATII		isinata anlu						
*Please fill in	event to part	lcipate only	Best Tim	10			Best Time	$\overline{}$
Eve	ent	Event No.	M M: S S.		Event	Event No.	M M: S S. S	s
50m Butterfly	<u> </u>		101 101. 3 3.	J J	50m Breaststroke		101 101: 3 3: 3	
100m Breasts					100m Freestyle			
50m Backstro					100m Backstroke			
100m Butterf					50m Freestyle			-
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[C] TERMS & CO	NDITION							
 4) Qualifying 5) A fine of R 6) All entries heat and t 7) Fill up the 8) This form and the p 9) There will 10) Coaches h By signing this, I terms and condi 	time applies. M100 will be must be enter to encourage event no., be must be subre ayment must be no change as the right to hereby decla tion and here nittee under a	e imposed on sered with their keen competites time and comitted to DSA abe completed es allowed after o withdraw or that all inforce by agreed to pany circumstar	wimmer who r official perso tion. onsult the coac administrative before the "(er submission add events for	does ronal be ches be countilled Club Club of Swinar swinar swinar salty a	not swim within the Qualify st time. This will enable swim efore submitting. Incompleter or via email (dsaswimter losing Date". Late entries wim Meet Form. Inmer and it is finaled. True and correct and I have and any charges imposed by erstand all decision made by [E] COACH'S AGREEMENT	vimmers to be ete form will no eam@dswimac will not be ente e read and uncoy the swim me by DSA coaches	seeded in the right of be accepted. ademy.com) rtained. derstand all et is final.	nt
Swimmer Full Na	me ·				Coach Name :			
Date	:				Date :			
					[F] OFFICE USE ONLY			
	Parent	: Signature			Admin Sign	ature & Paymo	ent Stamp	
Parent Full Name Date	:			<- cut	Payment Amount : Date & Time Received : here ->			
[G] OFFICE USE O	ONLY - SWIMI	MER'S COPY						
Meet Title	: <u>36</u>	th NATIONAL	INTER-CLUB S	WIMI	MING CHAMPIONSHIPS 20	17 FOR THE PF	RESIDENT CUP	
Swimmer's Name	e :				Date and Time Received	:		

Remark