Nomination Form

Swimmer: _____

Male / Female (circle) **D.O.B** _____

Age at Competition _____

Name of Competition _____

_____

Date of Meet _____

Please note:

Manual Nominations are **NOT ACCEPTED** for any State/National level Meets. Online entries apply, using your SQ Registration details.

Email nominations are **NOT ACCEPTED** for any Meets

NO Nomination will be processed without Payment
(Payment must accompany nomination/Cash/Cheque only)

Any queries, please contact Race Secretary on :
Phone : 5531-9919 or Janice.Cole@tss.qld.edu.au
Competition Calendar: www.tssaquatic.com.au

EVENT NO	DISTANCE /STROKE	TIME	Meet/Date of when achieved

To support your son/daughter at the Carnival, a member of your family will be required to assist with Timekeeping, your assistance is greatly appreciated, a little help by all families will ensure everyone has the opportunity to see their children compete and it will be an enjoyable experience for all. Please complete with details below of the family member who will assist:
Name: _____ Ph: _____