

**olSWIMMING FEDERATION OF INDIA**

11/A Vithalbhai Patel Colony,  
B/h Damubhai Vidyarthi Bhavan,  
Near Lakhudi Circle, Navrangpura  
AHMEDABAD-380 009

**17<sup>th</sup> National Masters championships 2021**

MANGALORE

26<sup>th</sup> to 28<sup>th</sup> November, 2021

**Individual Registration Form**

To be received by organizers prior to 15<sup>th</sup> November 2021.

To be completed by all masters competitors.

Personal information: To be completed by all competitors.

Surname \_\_\_\_\_

Given Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City/Town \_\_\_\_\_ Post Code \_\_\_\_\_

Phone No. \_\_\_\_\_ Email. \_\_\_\_\_

Sex:-Male /female Date of Birth : \_\_\_\_\_ Day \_\_\_\_\_ Month \_\_\_\_\_ Year

Age as at 31<sup>st</sup> December 2021 \_\_\_\_\_ years.

I wish to compete in the swimming / diving events in 17th National Masters Championships 2021 as per SFI entry form.

**Release from liability**

I hereby declare that I exonerate of all liability and responsibility however so arising, the SFI, its affiliates, venue owners, the organizing committee, sponsors and any other persons that participate in the masters events, in respect to all and every action or claim about any accident that may occur (except liability and responsibility for personal injury or death caused due to negligence of those respective bodies or persons). I understand how risky the competitions in which I am going to participate are, and I hereby certify that I am physically fit and have good health; suitable to compete in this

**Warning:** Only well prepared and medically fit competitors should enter the 17th National Masters Championship 2021.

Date: \_\_\_\_\_

Signature of competitor: \_\_\_\_\_

Please return this registration form along with entry form on or before **15<sup>th</sup> November 2021**

to; Shri M Satish Kumar, Organising Secretary,

Karnataka Swimming Association, 17<sup>th</sup> National Masters Championships 2021,

Bangalore, Karnataka

Contact No. 09880673988(M) Email: [karnatakaswimming@gmail.com](mailto:karnatakaswimming@gmail.com)

Countersigned by  
Hony' Secretary of the Affiliated Unit of SFI & Seal

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**Swimming Entry Form**

Surname \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Given Name \_\_\_\_\_ Age Group: \_\_\_\_\_

Events	Entry Time Min. sec. 1/100	Please (X) against the event for entry
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50 met. Free Style \_\_\_\_\_

100 met. Free Style \_\_\_\_\_

200 met. Free Style \_\_\_\_\_

400 met. Free Style \_\_\_\_\_

50 met. Back Stroke \_\_\_\_\_

100 met. Back Stroke \_\_\_\_\_

50 met. Breast Stroke \_\_\_\_\_

100 met. Breast Stroke \_\_\_\_\_

50 met. Butterfly Stroke \_\_\_\_\_

100 met. Butterfly Stroke \_\_\_\_\_

200 met. Individual Medley \_\_\_\_\_

4X50met. Free Style Relay \_\_\_\_\_

4X50met. Medley Relay \_\_\_\_\_

(Club/ units can enter one relay Team of 4 members)

(Swimmer can enter in maximum 4 individual events)

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

Please return this Entry Form on or before **15<sup>th</sup> November 2021** to:

Shri M Satish Kumar, Organising Secretary,

Karnataka Swimming Association, 17<sup>th</sup> National Masters Championships 2021,

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