

<b>9<sup>th</sup> ANNUAL 5KM OPEN WATER SWIMMING CHAMPIONSHIPS – COLOMBO 2019</b>
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TO: THE TREASURER  
SRI LANKA AQUATIC SPORTS UNION  
Department of Sports Development  
No.33 Torrington Place, Colombo 00700

<b>PAYMENT FORM</b>
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NAME OF ORGANIZATION: \_\_\_\_\_ REG. NO \_\_\_\_\_

EVENT	ENTRY SHEET NO(S)	ENTRY FEE	NUMBER OF ENTRIES x FEE	TOTAL AMOUNT
01	02	03	04	05
SWIMMING – MEN		Rs: 500.00	x 500.00	
SWIMMING – WOMEN		Rs: 500.00	x 500.00	
<b>TOTAL</b>				

WE CERTIFY THAT THE COMPETITORS ENTERED ARE PRESENT STUDENTS/MEMBERS OF THIS SCHOOL/CLUB.

\_\_\_\_\_  
TEACHER IN CHARGE / SECRETARY

\_\_\_\_\_  
TELEPHONE NUMBER

- (I) PLEASE USE THE CORRECT ENTRY FORM FOR EACH DISCIPLINE SUBMITTED.
- (II) SLASU COMPETITOR REGISTRATION NUMBER MUST BE ENTERED.
- (III) SEPARATE APPLICATIONS FORMS MUST BE SUBMITTED FOR MEN & WOMEN.
- (IV) PAYMENT MUST ACCOMPANY ENTRY FORM.

**9<sup>th</sup> Annual 5Km Open Water Swimming Championships – Colombo 2019**

**INDIVIDUAL ENTRY FORM**

FAMILY NAME		REGISTRATION NO.	
GIVEN NAME		DATE OF BIRTH (day/month/year)	
CLUB/SCHOOL		MALE/ FEMALE	

**COMPETITOR'S DECLARATION**

"I, the undersigned declare that I am fit to compete in the above event. I further certify that I am aware of the perils of open water swimming and that I shall hold neither the delegate nor the officials responsible in any way for loss, harm, accident, illness caused by natural perils of nature during my participation.

Signature of Competitor

Date

Signature and Name of Parent / Legal Guardian

Date

**Note 2: If the competitor is below the age of 18 years at the time of the competition, a parent or legal Guardian needs to sign above**

