

SWIMMING

Relay

Gender ☐ Boys ☐ Girls

Age Group ☐ U - 10 ☐ U - 12 ☐ U - 14 ☐ U - 18

**In a team all six participating swimmers must be from the same school*

Under the aegis of:

School Name: _____

School Authority /
Sports Co-ordinator /
Coach:

Name _____

Phone No. _____

| Team List | Name |
|-----------|------|
| Coach | |
| Swimmer 1 | |
| Swimmer 2 | |
| Swimmer 3 | |
| Swimmer 4 | |
| Swimmer 5 | |
| Swimmer 6 | |

Please tick the appropriate events (mentioned in the box below)

Events:

☐

4 x 50m
Freestyle
Relay

☐

4 x 50m
Medley
Relay

Signature of School Coach / Principal: _____

For Official Use Only

Form No.:

Date.: _____

Inwards No.:

SFA Rec Stamp

SWIMMING

Relay

School Name: _____

School Authority /
Sports Co-ordinator / Coach: _____ Name _____ Phone No. _____

Swimmer - 1 _____
Last Name _____
First Name _____
Middle Name _____
Participant's Residential Address: _____

Participant's Email ID: _____

Date of Birth: _____
Day _____ Month _____ Year _____ Age: _____ SFA ID*: _____

Emergency Contact: (Parent / Guardian) Name: _____ Res: _____
Mob: _____

Swimmer - 2 _____
Last Name _____
First Name _____
Middle Name _____
Participant's Residential Address: _____

Participant's Email ID: _____

Date of Birth: _____
Day _____ Month _____ Year _____ Age: _____ SFA ID*: _____

Emergency Contact: (Parent / Guardian) Name: _____ Res: _____
Mob: _____

Swimmer - 3 _____
Last Name _____
First Name _____
Middle Name _____
Participant's Residential Address: _____

Participant's Email ID: _____

Date of Birth: _____
Day _____ Month _____ Year _____ Age: _____ SFA ID*: _____

Emergency Contact: (Parent / Guardian) Name: _____ Res: _____
Mob: _____

SWIMMING

Relay

Swimmer - 3

Last Name

First Name

Middle Name

Participant's
Residential Address:

Participant's Email ID:

Date of Birth:

Day

Month

Year

Age: _____ SFA ID*: _____

Emergency Contact:
(Parent / Guardian)

Name: _____

Res: _____

Mob: _____

Swimmer - 5

Last Name

First Name

Middle Name

Participant's
Residential Address:

Participant's Email ID:

Date of Birth:

Day

Month

Year

Age: _____ SFA ID*: _____

Emergency Contact:
(Parent / Guardian)

Name: _____

Res: _____

Mob: _____

Swimmer - 6

Last Name

First Name

Middle Name

Participant's
Residential Address:

Participant's Email ID:

Date of Birth:

Day

Month

Year

Age: _____ SFA ID*: _____

Emergency Contact:
(Parent / Guardian)

Name: _____

Res: _____

Mob: _____

SWIMMING

Relay

1. AGE GROUPS & ELIGIBILITY CRITERIA :-

- The SFA Mumbai 2016 Swimming Competition will be conducted in accordance with the age groups, events mentioned in the table below.
- Students from schools registered with Sports For All will get first preference for participation.
- Incomplete details in the entry forms or any manipulation in the entries will not be accepted by the Tournament Organizing Committee.
- The below mentioned age criteria will be considered:-

| Age Groups & Cut Off Dates | | |
|----------------------------|------------|---|
| Sr. No. | Age Groups | Cut Off Dates |
| 1 | U-10 | Born on or After 1 st July 2006 |
| 2 | U-12 | Born Between 1 st July 2004 - 30 th June 2006 |
| 3 | U-14 | Born Between 1 st July 2002 - 30 th June 2004 |
| 4 | U-18 | Born Between 1 st July 1998 - 30 th June 2002 |

3. RULES & REGULATIONS:-

- Every participant must carry his/her school ID along with age proof at all times during the competition. No participant will be allowed to play his/her match if they do not have their school ID along with valid age proof.
- The participant must report at the venues main registration desk 45 minutes prior to his/her scheduled event.
- The participant has to report 15 minutes prior to his/her scheduled event time at The Swimming registration desk.
- The Swimming Competition schedule will be published on our website – www.sfanow.in 30 days prior to SFA Mumbai 2016.
- Any participant is found over age or with any manipulation in his/her documents, will be disqualified without any kind of prior intimation.
- Participants must wear appropriate swimwear.
- Every swimmer must carry his/her swimming goggles and cap at all times during the event.
- The Competition Organizing Committee has the right to postpone or cancel the competition in the case of unavoidable circumstances. All schools are requested to co-operate in any such case.
- In case of any dispute the decision of the Competition Organizing Committee will be final and binding.
- No player will be allowed to use their mobile phones in the stipulated playing arena.
- For any kind of further details of the tournament the School Authority / Parent / Participant can contact us on our info lines or email us on the following:
 - +91 7045684365/66/67
 - info@sfanow.in

4. COMPETITION ORGANIZING COMMITTEE:-

- Competition Director.
- Competition Referee.
- SFA Representative.