



## PRE ENTRIES ONLY

### SOUTH AFRICAN MASTERS SHORT COURSE CHAMPIONSHIPS 2020/2021

#### REGIONAL HEAT – HOSTED BY GMS

<b>Date:</b>	16 January 2021	<b>Registration:</b>	12:00 – 12:45 (COVID Screening)
<b>Venue:</b>	Wahoo Aquatics, Sunninghill	<b>Start Time:</b>	13:00
<b>PRE-ENTRIES ONLY: MIXED</b>		<b>EVENT</b>	
<b>Event No.</b>	<b>Estimated Time</b>		
1		200m Individual Medley	
		<b>10 minute break</b>	
2		400m Freestyle	
3		50m Breaststroke	
4		200m Butterfly	
5		100m Backstroke	
		<b>10 minute break</b>	
6		50m Freestyle	
7		200m Breaststroke	
8		100m Individual Medley	
9		50m Butterfly	
		<b>10 minute break</b>	
10		50m Backstroke	
11		200m Freestyle	

- A swimmer may enter a maximum of **6** events and compete in **one** Regional championship gala.
- Submit for each event a recent or reasonable time, **failing which you will NOT be entered.**
- Please call for 3 (**three**) timekeepers at pool-side if you are attempting to break a record or qualify for SA Colours.
- Please note - *a swimmer must be a Registered Masters Swimmer before or on the day of the gala in order to participate AND must provide their SSA COVID Tracking number in order to enter.*
- Entry fee is R100.00 regardless of how many events you enter.
- Payment to Gauteng Masters Swimming
  - Nedbank – Parktown
  - Branch Code 194405
  - Account No: 1944058729
- **CLOSING DATE** for entries is **THURSDAY, 14<sup>th</sup> January 2021 at 15H00**
- **Send entries to:** e-mail: [GautengMastersSwimming@gmail.com](mailto:GautengMastersSwimming@gmail.com)
- **By entering,** I agree that I participate at my own risk, waive any claim arising from or connected with any injury or loss that I may sustain while, or as a result of, participating in any Masters Swimming or related activity whether caused by negligence or otherwise against Gauteng Masters Swimming and South African Masters Swimming, their officers, members, employees, agents and assistants and indemnify them in respect of any claim against them arising from my participation in Masters Swimming or related activity.

<b>FIRST NAME</b>		<b>SURNAME</b>	
<b>CLUB</b>		<b>DATE OF BIRTH</b>	
<b>CONTACT NO</b>		<b>GENDER (M/F)</b>	
<b>E-MAIL</b>		<b>SSA COVID TRACKING No</b>	