

SWIMMING SOUTH AFRICA.

ACCEPTANCE FORM

As a member of the SSA Squad to participate at the 2014 Pan Pacific Swimming Championships, 21 – 25 August 2014, Gold Coast, Australia.

I.....(name in print)

- Will be available
- Will not be available

Signature.....

Date.....

N B Please attached a copy of your valid passport

If under 18 this form must be signed by the parent or legal guardian

Signature.....Parent/Guardian

Date.....

CONTACT DETAILS

TEL: FAX:

E-MAIL:

SIZES: Tracksuit T-Shirt Shorts Swimming Costume

Kindly fax or e-mail this form to your Affiliate office and SSA Office by no later than Thursday 1st July 2014

Fax No: 011 402 2486/0866 157 709 e-mail : mpho@swimsa.co.za,
dslattery@mweb.co.za