

SOUTH AFRICAN NATIONAL AQUATICS CHAMPIONSHIPS
Stellenbosch, 4 – 8 April 2018

WATER POLO ENTRY FORM

To be returned to dave@swimsa.co.za, and daphne@swimsa.co.za
 by **12 noon on Friday 2nd March 2018**

TEAM NAME _____

PROVINCE _____

MALE / FEMALE / A Section / U/18 section

Circle the appropriate section

SURNAME	FIRST NAME (Do not use 'nicknames')	SSA REG NO.	CAP NO.
			MANAGER
			Asst MANAGER
			COACH
			Asst COACH
			REFEREE
			1
			2
			3
			4
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N.B. This document will not be accepted by SSA unless it is signed by the Affiliate President

AFFILIATE PRESIDENT _____
Name

DATE _____
Signature