

**NATIONAL PARA SWIMMING CHAMPIONSHIPS 2025**

**&**

**INTER-SCHOOL PARA SWIMMING CHAMPIONSHIPS 2025**





## FORM A

NATIONAL PARA SWIMMING CHAMPIONSHIPS 2025

INTER-SCHOOL PARA SWIMMING CHAMPIONSHIPS 2025

| **Name of Team Manager / Person-in-Charge** |  | |
| --- | --- | --- |
| **Organisation / School (if applicable)** |  | |
| **Contact Number** | **(Office)** | **(Mobile)** |
| **Email** |  |  |

ENTRY FORM

**Please refer to entry information given for table of events and classification.**

**Entries will be void if the events and classification registered is/are not in accordance with the entry’s specifications Note that all registered events must state the actual / estimated entry time (seed time).**

**Please enter clearly and duplicate form for additional participants, if necessary. Accreditations are not transferable.**

**PARTICIPANTS**

| **No** | **Participant Full Name** | **Age** | **Gender** | **Year born** | **Sport Class** | **Event &**  **Seed Time** | **Event &**  **Seed Time** | **Event &**  **Seed Time** | **Event &**  **Seed Time** | **Event &**  **Seed Time** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *E.g. 1.* | *Tan Kim Yi* | *7* | *F* | *2018* | *II3* | FR100  Mm:ss.00 (eg)1:01.01 | FLY100 1:05.04 | BK100 1:07.21 | BK50 00:35.21 | FR 50  00:40:03 |
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**OFFICIALS**

**Officials eligible for accreditation:**

* **Team Manager (TM)**

* **Coach (C)**

* **Caregiver (CG) (Limited to participants who require additional physical or social assistance; capped at 1 caregiver per participant)**

| **No** | **Official Full Name** | **Gender** | **Accreditation (TM / C / CG)** | **For CG: Please state full name of participant to be supported** |
| --- | --- | --- | --- | --- |
| *E.g. 1.* | *Goh Siew Ting* | *F* | *CG* | Tan Kim Yi |
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**Total No.**

Closing Date: 10 March 2025

**Submit** [**to**](mailto:tze.wei@sdsc.org.sg)[nurul.fiona@sdsc.org.sg](mailto:nurul.fiona@sdsc.org.sg)

## FORM B



**PHOTOGRAPHY AND VIDEOGRAPHY REFUSAL FORM**

| Full Name of Participant: |  |
| --- | --- |
| Event: | National Para Swimming Championships 2025  Inter-School Para Swimming Championships 2025 |

I refuse permission for the use of images of my child or myself by the Organiser.



Signed by: (Name of Participant / Parent / Caregiver) Date:

Closing Date: 10 March 2025

**Submit** [**to**](mailto:tze.wei@sdsc.org.sg) [nurul.fiona@sdsc.org.sg](mailto:nurul.fiona@sdsc.org.sg)