



SWIMMING FEDERATION OF INDIA

REGISTRATION FORM

Name of State/Unit _____ Year _____

Sr. No.	Name of Competitor	Date of Birth	Gender (B/G/M/W)	Age Group	Remarks

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



**SWIMMING FEDERATION OF INDIA
JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM**

BOYS - GROUP - I (15 to 17 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

	Name	Time Clocked in	State Championship/Trials
1. 50 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
2. 100 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
3. 200 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
4. 400 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
5. 800 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
6. 1500 m Free Style	1. _____	_____	_____
	2. _____	_____	_____
7. 50 m Back Stroke	1. _____	_____	_____
	2. _____	_____	_____
8. 100 m Back Stroke	1. _____	_____	_____
	2. _____	_____	_____
9. 200 m Back Stroke	1. _____	_____	_____
	2. _____	_____	_____
10. 50 m Breast Stroke	1. _____	_____	_____
	2. _____	_____	_____
11. 100 m Breast Stroke	1. _____	_____	_____
	2. _____	_____	_____
12. 200 m Breast Stroke	1. _____	_____	_____
	2. _____	_____	_____
13. 50 m Butter Fly Stroke	1. _____	_____	_____
	2. _____	_____	_____
14. 100 m Butter Fly Stroke	1. _____	_____	_____
	2. _____	_____	_____
15. 200 m Butter Fly Stroke	1. _____	_____	_____
	2. _____	_____	_____
16. 200 m Individual Medley	1. _____	_____	_____
	2. _____	_____	_____
17. 400 m Individual Medley	1. _____	_____	_____
	2. _____	_____	_____
18. 4 x 100 m Free Style Relay	1. _____	_____	_____
19. 4 x 200 m Free Style Relay	1. _____	_____	_____
20. 4 x 100 m Medley Relay	1. _____	_____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
BOYS - GROUP - II (12 to 14 YEARS)

Name of State/Unit _____ Year _____

	SWIMMING	
	Name	Time
1. 50 m Free Style	1. _____ 2. _____	_____ _____
2. 100 m Free Style	1. _____ 2. _____	_____ _____
3. 200 m Free Style	1. _____ 2. _____	_____ _____
4. 400 m Free Style	1. _____ 2. _____	_____ _____
5. 800 m Free Style	1. _____ 2. _____	_____ _____
6. 1500 m Free Style	1. _____ 2. _____	_____ _____
7. 50 m Back Stroke	1. _____ 2. _____	_____ _____
8. 100 m Back Stroke	1. _____ 2. _____	_____ _____
9. 200 m Back Stroke	1. _____ 2. _____	_____ _____
10. 50 m Breast Stroke	1. _____ 2. _____	_____ _____
11. 100 m Breast Stroke	1. _____ 2. _____	_____ _____
12. 200 m Breast Stroke	1. _____ 2. _____	_____ _____
13. 50 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
14. 100 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
15. 200 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
16. 200 m Individual Medley	1. _____ 2. _____	_____ _____
17. 400 m Individual Medley	1. _____ 2. _____	_____ _____
18. 4 x 100 m Free Style Relay	1. _____	_____
19. 4 x 200 m Free Style Relay	1. _____	_____
20. 4 x 100 m Medley Relay	1. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



**SWIMMING FEDERATION OF INDIA
JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
GIRLS GROUP - I (15 to 17 YEARS)**

Name of State/Unit _____ Year _____

SWIMMING

	Name	Time Clocked
1. 50 m Free Style	1. _____ 2. _____	_____ _____
2. 100 m Free Style	1. _____ 2. _____	_____ _____
3. 200 m Free Style	1. _____ 2. _____	_____ _____
4. 400 m Free Style	1. _____ 2. _____	_____ _____
5. 800 m Free Style	1. _____ 2. _____	_____ _____
6. 1500 m Free Style	1. _____ 2. _____	_____ _____
7. 50 m Back Stroke	1. _____ 2. _____	_____ _____
8. 100 m Back Stroke	1. _____ 2. _____	_____ _____
9. 200 m Back Stroke	1. _____ 2. _____	_____ _____
10. 50 m Breast Stroke	1. _____ 2. _____	_____ _____
11. 100 m Breast Stroke	1. _____ 2. _____	_____ _____
12. 200 m Breast Stroke	1. _____ 2. _____	_____ _____
13. 50 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
14. 100 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
15. 200 m Butter Fly Stroke	1. _____ 2. _____	_____ _____
16. 200 m Individual Medley	1. _____ 2. _____	_____ _____
17. 400 m Individual Medley	1. _____ 2. _____	_____ _____
18. 4 x 100 m Free Style Relay	1. _____	_____
19. 4 x 200 m Free Style Relay	1. _____	_____
20. 4 x 100 m Medley Relay	1. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



**SWIMMING FEDERATION OF INDIA
JUNIOR NATIONAL AQUATIC CHAMPIONSHIP**

ENTRY FORM

GIRLS GROUP – II (12 to 14 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

	Name	Time Clocked
1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 200 m Free Style	1. _____	_____
	2. _____	_____
4. 400 m Free Style	1. _____	_____
	2. _____	_____
5. 800 m Free Style	1. _____	_____
	2. _____	_____
6. 1500 m Free Style	1. _____	_____
	2. _____	_____
7. 50 m Back Stroke	1. _____	_____
	2. _____	_____
8. 100 m Back Stroke	1. _____	_____
	2. _____	_____
9. 200 m Back Stroke	1. _____	_____
	2. _____	_____
10. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
11. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
12. 200 m Breast Stroke	1. _____	_____
	2. _____	_____
13. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
14. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
15. 200 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
16. 200 m Individual Medley	1. _____	_____
	2. _____	_____
17. 400 m Individual Medley	1. _____	_____
	2. _____	_____
18. 4 x 100 m Free Style Relay	1. _____	_____
19. 4 x 200 m Free Style Relay	1. _____	_____
20. 4 x 100 m Medley Relay	1. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
BOYS
GROUP – III (11 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 200 m Free Style	1. _____	_____
	2. _____	_____
4. 400m Freestyle	1. _____	_____
	2. _____	_____
5. 50 m Back Stroke	1. _____	_____
	2. _____	_____
6. 100 m Back Stroke	1. _____	_____
	2. _____	_____
7. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
8. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
9. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
10. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
11. 200 m Individual Medley	1. _____	_____
	2. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
BOYS
GROUP – IV (10 YEARS)

Name of State/Unit _____ Year _____

SWIMMING
Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 200 m Free Style	1. _____	_____
	2. _____	_____
4. 50 m Back Stroke	1. _____	_____
	2. _____	_____
5. 100 m Back Stroke	1. _____	_____
	2. _____	_____
6. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
7. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
8. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
9. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
10. 200 m Individual Medley	1. _____	_____
	2. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
BOYS
GROUP – V (09 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 50 m Back Stroke	1. _____	_____
	2. _____	_____
4. 100 m Back Stroke	1. _____	_____
	2. _____	_____
5. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
6. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
7. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
8. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
9. 200 m Individual Medley	1. _____	_____
	2. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
GIRLS
GROUP – III (11 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 200 m Free Style	1. _____	_____
	2. _____	_____
4. 400m Freestyle	1. _____	_____
	2. _____	_____
5. 50 m Back Stroke	1. _____	_____
	2. _____	_____
6. 100 m Back Stroke	1. _____	_____
	2. _____	_____
7. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
8. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
9. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
10. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
11. 200 m Individual Medley	1. _____	_____
	2. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
GIRLS
GROUP – IV (10 YEARS)

Name of State/Unit _____ Year _____

SWIMMING

Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 200 m Free Style	1. _____	_____
	2. _____	_____
4. 50 m Back Stroke	1. _____	_____
	2. _____	_____
5. 100 m Back Stroke	1. _____	_____
	2. _____	_____
6. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
7. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
8. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
9. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
10. 200 m Individual Medley	1. _____	_____
	2. _____	_____

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Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit



SWIMMING FEDERATION OF INDIA
SUB JUNIOR NATIONAL AQUATIC CHAMPIONSHIP
ENTRY FORM
GIRLS
GROUP – V (09 YEARS)

Name of State/Unit _____ Year _____

SWIMMING
Name

Time Clocked in
State Championship/Trials

1. 50 m Free Style	1. _____	_____
	2. _____	_____
2. 100 m Free Style	1. _____	_____
	2. _____	_____
3. 50 m Back Stroke	1. _____	_____
	2. _____	_____
4. 100 m Back Stroke	1. _____	_____
	2. _____	_____
5. 50 m Breast Stroke	1. _____	_____
	2. _____	_____
6. 100 m Breast Stroke	1. _____	_____
	2. _____	_____
7. 50 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
8. 100 m Butter Fly Stroke	1. _____	_____
	2. _____	_____
9. 200 m Individual Medley	1. _____	_____
	2. _____	_____

I certify that the above mentioned competitors are eligible according to the FINA rules and being residents _____ compete in the championship.

Date :

Signature of Honorary Secretary
Name, Address & Sean of the State/Unit

SWIMMING FEDERATION OF INDIA

_____ Sub Junior/Junior/Senior National Aquatic Championship

Held at _____ From _____ To _____

DIVING TEAM ENTRY FORM

GROUP _____ BOYS / GIRLS

No.	NAMES	DATE OF BIRTH	SPRING BOARD		HIGH BOARD	
			1 mtr.	3 mtr		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Signature of Honorary Secretary
Name, Address & Seal of the State/Unit

SWIMMING FEDERATION OF INDIA

47th GLENMARK Junior National Aquatic Championship

Held at _____ From _____ To _____

NAME OF STATE/UNIT : _____

LIST OF WATERPOLO PLAYERS

Cap No.	NAME OF PLAYERS (IN CAPITAL)	DATE OF BIRTH	REMARKS
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			

Signature of Honorary Secretary
Name, Address & Seal of the State/Unit