

POSTAL TIME SHEET – CABOOLTURE CRAYS ALL POSTAL EVENT

EVENT FIVE – 400 FREE – LONG COURSE

The form and payment must be sent to the QCD.

<u>Club Name:</u>	<u>Club Code:</u>	<u>Gender:</u>
<u>First Name:</u>	<u>Surname:</u>	<u>Date of Birth:</u>
<u>AGE:</u>	<u>Pool Length:</u>	<u>Swim Date:</u>
	Time 1	Time 2
100M		
200M		
300M		
400M		

Timekeepers:

NAME _____ SIGNATURE _____

NAME _____ SIGNATURE _____

SUPERVISOR _____ SIGNATURE _____

Q12/19

A postal swim must be done under the supervision of an accredited referee, coach or club official with Knowledge of the rules of swimming to verify that strokes and turns were executed in accordance with The Masters' Rules. The supervisor should sign the entry form to acknowledge the swim was performed correctly.