



Entry Form 2014

Full Name: _____

Please supply your full name as you wish to have it spelled on the start list and the results.

Date of Birth: _____

Your date of birth will not be published and will be used only for our own records. The youngest swimmer on the day will receive the Martin Duggan Memorial Shield.

Swimming Club: _____

Please enter the name of your club of first claim for all open water swimming events.

Swim Ireland Nº: _____

If you're coming from outside of Swim Ireland's jurisdiction, enter the name of your country.

Estimated Time (mm:ss): _____

Please note that there is a maximum time of 1 hour for this swim.

Email Address: _____

If you will be aged 17 years or younger on the day of the swim, please give the email address of a parent/legal guardian rather than your own.

Mobile Number: _____

If you will be aged 17 years or younger on the day of the swim, please give the mobile number of a parent/legal guardian rather than your own.

Event Waiver

I, the participant, am fully aware of the need to be well prepared and medically fit before taking part in this event and assume full responsibility for all of the risks involved. I agree to waive and release the organising committee, Sandycove Island SC, Swim Ireland, Fermoy Rowing Club and all volunteers and other participants from any kind of liability for illness or accident which may cause injury or death and any kind of liability for loss or damage of property. I agree to obey fully the instructions of the event officials on the day of the event.

Signature: _____

Date: _____

Thank you for your entry. Don't forget that, if you will be aged 17 years or younger on the day of the swim, you must include a signed and dated copy of the Parental Consent Form with this entry form. We look forward to seeing you in Fermoy on Friday, 6 June 2014!