

Date :

To : The Penang Amateur Swimming Association (P.A.S.A.)
c/o No. 7, Brown Road, 10350 Penang
(Email: honsec.pasa@yahoo.com)

RE : 54th P.A.S.A. STATE AGE GROUP SWIMMING CHAMPIONSHIPS
Friday 26th, Saturday 27th, Sunday 28th January 2018
PERMISSION & INDEMNITY (18 years old & above)

Reference above, I

Name	Age	Club / Team
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agree to attend and participate in the above Swimming Championships.

I do hereby understand that although the organizers and its appointed officers shall take precautions to ensure the safety of the participants, the Penang Amateur Swimming Association (P.A.S.A.) and its officers shall be indemnified and shall not be held responsible or liable for any accidents, injuries or mishaps that may arise from my son / daughter / ward's participation in the Swimming Championships.

I also agree & understand that my son / daughter / ward shall abide and shall at all times be subject to the rules and regulations of the Swimming Championships, the Penang Amateur Swimming Association (P.A.S.A.) and the instructions and discipline of the Meet Officials.

Sincerely yours,

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Signature of Participant

Name:

NRIC:

Address:

Contact Tel nos.: