

TEAM CLEARANCE FORM AUTHORISATION TO COMPETE ABROAD

The swi	immers listed on Attachment A,							
who are	e registered members of the:		Swimming Association					
which i	s affiliated to Swimming Australi	(State Association)	part in the following competitions:					
WHICH	s anniated to Swimming Australia		part in the following competitions.					
Name	of Meet	Date of Meet	Type of Meet (Open or Age Group)					
The Co	untry and Cities they propose to	visit are:						
Please	stipulate how the athlete/s meet							
Meets the FINA Points score (complete attachment A)								
	Received invitation from meet organisers (Attach invitation)							
	Educational (name of institution attending)							
	Family relocation for work com	mitments (outline below)						
	Family Holiday (complete attac	hment A)						
Period	of clearance is From :	То:						
	oup of athletes agree to observe where the competition is held.	the rules of the Organisation	on, which governs amateur swimming in the					
Арр	roved by State Association	Approved by Swimmin	g Australian Ltd					
Signatu	re:							
Print Na	ame:							
Title:								
Date:								
NB.	This authorisation is only valid	for the period shown.						
	2, 50-56 York Street Melbourne, VIC, 3205							

Greng ** Sportaus @ City Fertility

South Melbourne, VIC, 320 admin@swimming.org.au swimming.org.au



Attachment A THIS FORM MUST BE COMPLETED AND RETURNED WITH: SWIMMING AUSTRALIA TEAM – CLEARANCE FORM

AUTHORISATION TO COMPETE ABROAD

	Best performance of athlete in 12 months prior to date of first meet team/swimmer is attending (1 event only)					
Name of Athlete	Event	Time	Date Achieved	Place Achieved	FINA Points Score	

NOTE:

• Points must be achieved in the 12 months prior to the first day of the meet the team/athlete is planning to attend.

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• This form must be completed fully and submitted at least 6 weeks before the departure date of the team/swimmer.