

<b>BAYSIDE DISTRICT SELECTION - ABSENT COMPETITOR</b>
---

(N.B. This form is to be used for students who are unable to compete at the 2016 Bayside District 10 – 19yrs Swimming Trials due to injury, illness or absence at a competition of a higher level).

Student Name: \_\_\_\_\_ M / F

School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age Group: \_\_\_\_\_

**Reason for Application**

- (a) Medical (A doctor's certificate noting expected date of return to competition must be attached).
- (b) Absent at a championship of a higher level.

Sport	Championship	Details

**Only results achieved in 2015/2016 Season will be considered.  
Do not list results achieved prior to September 2015.**

Event	Age Group	Best 2014/2015 Time	Date of Performance	Venue	Name of Meet
<i>Example 100m</i>	<i>13 years</i>	<i>1.05.96</i>	<i>8.12.15</i>	<i>Chandler Aquatic</i>	<i>South District Carnival</i>

**A copy of the results from a sanctioned Swimming Qld event must be attached. It is important to note that submitting a time better than those swum at the District Trials does not guarantee selection in the Bayside Team.**

The absent competitor form must be delivered to **the Convenor** before the start of competition on the day of the District Trials on 18 February **2016**

**Signed - School Swimming Coordinator / Coach / Sportsmaster. (Circle)**

**Name:** \_\_\_\_\_

PRINTED

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

SIGNED