

# METROPOLITAN EAST SCHOOL SPORT

## 10-19YRS ATHLETES IN A MULTICLASS EVENT SWIMMING NOMINATION FORM

Complete this form to nominate for a 10-19yrs Athletes in a Multi-class Swimming Event at the Metropolitan East Regional Swimming Trials.

Student Name			
Date of Birth		Gender (select)	
School		Age Group (select)	
Classification		Exceptions	

**Select (✓) your desired event and complete the details.**

Select (✓)	Event	Name of Meet	Date of Meet	Time
	50 Metre Freestyle			
	50 Metre Backstroke			
	50 Metre Breaststroke			
	50 Metre Butterfly			
	100 Metre Freestyle			
	100 Metre Butterfly			
	100 Metre Breaststroke			
	100 Metre Backstroke			
	200 Individual Medley			
	200 Metre Freestyle			

### Certification - The times listed above have been certified by:

Name:		Position:	
Signature:		Date:	

**Return this form to Michael Herman [Michael.herman@qed.qld.gov.au](mailto:Michael.herman@qed.qld.gov.au) by  
FRIDAY 21 FEBRUARY 2025**