



Swimming Federation of India

14th October 2024

4th NATIONAL JUNIOR OPEN WATER SWIMMING CHAMPIONSHIPS -2024

To; All Office Bearers & Member units of SFI;

Dear Sir/Madam.

4th National Junior Open Water Swimming Championships – 2024 will be organized on 23rd & 24th NOVEMBER 2024 at PADUBIDRI, BLUE FLAG END POINT BEACH, UDUPI DISTRICT, Karnataka, by Karnataka Swimming Association under the auspices of Swimming Federation of India in association with Dept. of Youth Empowerment & Sports, Govt. of Karnataka.

The Age Groups & Events will be as under;

Group 4: Born in the year 2012, 2013, 2014	500mt
Group 3: Born in the year 2011	1 Km
Group 2: Born in the year 2009, 2010	2 Km
Group 1: Born in the year 2007, 2008	3 Km
Open: Born in the year 2006 and earlier	5 Km

MASTERS EVENTS;

1km, 3km, 5km.

Age Categories:

25 to 40, 41 to 50 and 51 to 60

All member units of the federation are invited to send their top Open Water Junior Players for this event.

Eligibility:

Group 4: Should have participated in any of the 400FS event, timing should be below 7min.

Group 3: Should have participated in any of the 400fs / 800fs event, timing should be below 7.30min

Group 2: Should have participated and completed in any of Open Water event in 1km and above or participated in 1500fs event in any of the SFI Nationals, timing to be below 22min

Group 1: Should have participated and completed in any of Open Water event in 2km and above or participated in 1500fs event in any of the SFI Nationals, timing to be below 22min.

Open Category: Should have participated and completed in any of Open Water Event in 5km and above. Above 25years participants should have participated and completed in any Open water event in 10km.

Masters:

Should have participated and completed in any of Recognized Open Water Event indistance they are willing to take part in.

Swimmer can enter in One Individual event, who have participated and completed earlier in Open Water event will be eligible or they should have participated in 1500fs in any of the national event and timed below 22min for group 2 and above. Group Swimmers will



represent their affiliated units in this Open Water meet and their entries have to be counter signed and sent by the respective member units. No spot/Late entries will be entertained.

The participants must be registered on SFI GMS portal have Valid SFI UID i.e. Valid MARCH 2025. No swimmer will be allowed to enter in the event that do not have valid SFI UID.

ENTRY FEES: - Rs. 500/= to be paid to Karnataka Swimming Association.

KARNATAKA SWIMMING ASSOCIATION

Shri M. Satish Kumar, Organising Secretary (M) 98806 73988

43, 12th Cross, Ram Mandir Road, S R Nagar, BANGALORE – 560 027

**Dormitory Accommodation will be provided by the Organizers (If informed in advance)
Food will be provided to all participants on subsidized rates by the Organizers.**

**ENTRIES WILL BE ACCEPTED AS PER THE FORMAT ATTACHED WITH THIS CIRCULAR ON
Email : karnatakaswimming@gmail.com or by Post at above address.**

Please send the Entry Fees by RTGD/NEFT or GPay to the following bank details;

A/c Number : 1054039302

Bank Name: Central Bank of India

IFSC Code: CBIN0280846

Name: Karnataka Swimming Association

Branch: Basavangudi, Bangalore 560 004

Last Date for Submission of Entry in all respect is 12th November 2024

ORGANISING COMMITTEE SHALL NOT ENTERTAIN ANY ENTRY AFTER DEADLINE.

Only SFI Registered players will be permitted to enter in the event.

Units are requested to send Maximum number of valid entries for this championships.

**Participants must report to the Organizers on 22nd November 2024 by 12:00 noon at the
Venue with their Medical Fitness Certificate, briefing about the program and course of
the event will be at 4:00 p m.**

All Correspondence concerning event should be addressed to;

Shri Monal D. Chokshi

General Secretary

Swimming Federation of India

45/311, Saraswati Nagar

Near Azad Society, Ambawadi

AHMEDABAD – 380 015

(Office) : 079 35658570

(M) 9898907087

Email: nanavatikamlesh@gmail.com

Shri M. Satish Kumar,

Secretary & Organising Secretary

Karnataka Swimming Association

43, 12th Cross, Ram Mandir Road

S R Nagar, BANGALORE – 560 027

Contact No. 98806 73988 (M)

Contact : Local Coordinator

Shri Rohit Babu : (M) 9844462077

Email: karnatakaswimming@gmail.com

Monal D. Chokshi

General Secretary

Encl: Entry & Registration Form

Acknowledgement, waiver and indemnity form

Swimming Federation of India

4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024, UDUPI

23rd & 24th November 2024

Individual Registration Form

To be completed by all competitors.

Surname _____

Given Name _____

Address _____

City/Town _____ Pin Code _____

Phone No. _____ SFI UID _____

E Mail ID. _____

Sex: - Male/Female; Date of Birth Day _____ Month _____ Year _____

Age as 31st December 2024 _____ Years.

Warning: Only well prepared and medically fit competitors should enter the National Open Water Swimming Championship.

1. I wish to compete in the 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024, UDUPI, KARNATAKA as per rules which abide them.
2. I hereby affirm and declare as follows:-
 - a) I do not suffer from any illness or other health condition that may be aggravated or lead to all consequences by participation in any of the said events;
 - b) I am otherwise in good health and I am fit to participate in the said Swimming events;
 - c) I fully understand the possible risks of injury including serious injury or even death which are associated with participation in the said Swimming events;
 - d) As I take part in the said Swimming events in good health & fitness with full understanding of the risks involved, any and every liability/responsibility arising out of any accident that may result in injury, disability (whether temporary or permanent and whether partial or total) or death shall be mine and mine alone and I will have no recourse to make any claim in this regard on the organizers of the events, State association venue owners, sponsors or any other persons associated with the event in any manner whatsoever.
3. I further affirm that I have signed this declaration on my own free will.

Date: _____

Signature of Competitor _____

Signature Parent (for minors only) _____

Please return this Registration form along with Entry form on or before 12TH November 2024 to
The Hon' Secretary, Karnataka Swimming Association. 43, 12th Cross, Ram Mandir Road, S R Nagar, Bangalore -
560027

Email: karnatakaswimming@gmail.com

Swimming Federation of India

4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024, UDUPI

23rd & 24th November 2024

Open Water Swimming ENTRY FORM

Name _____

Given Name _____

Age Group _____

Events

Please (X) against
the event for entry

500mt Group 4 Category _____

1 KM Group 3 Category _____

2 KM Group 2 Category _____

3 KM Group 1 Category _____

5 KM Open Category _____

1 KM Master Category _____

3 KM Master Category _____

5 KM Master Category _____

Date: - _____

Signature of Competitor _____

Seal & Signature of the Affiliated Unit. _____

Please return this Entry Form on or before 12th November to
The Hon' Secretary, Karnataka Swimming Association. 43,12th Cross, Ram Mandir Road, S R Nagar, Bangalore
-560027

Email: karnatakaswimming@gmail.com

SWIMMING FEDERATION OF INDIA

ACKNOWLEDGEMENT, WAIVER AND INDEMNITY FORM

4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024, UDUPI

READ CAREFULLY BEFORE SIGNING ACKNOWLEDGEMENT, WAIVER AND RELEASE FROM LIABILITY AND POTENTIAL CLAIMS BASED UPON NEGLIGENCE OR OTHER CLAIMED MISCONDUCT (HERE IN AFTER KNOWN AS "ALWR ")

1. I acknowledge a Open Water Swimming/Diving/High Diving/Water Polo/Swimming and / or multi-sport event is an extreme test of a person's physical and mental limits, and carries with it the potential for death, serious injury and property loss .The risks include, but are not limited to, pollution, temperature, currents and waves, weather, condition of athletes, equipment, vehicle traffic, actions of participants, volunteers, spectators and/or producers of the event and lack of hydration. I HEREBY ASSUME THE RISKS OF PARTICIPANTING IN THE 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024,UDUPI,KARNATAKA
2. I certify that I am physically fit, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person.
3. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:
 - a. WAIVER, RELEASE, AND DISCHARGE from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereinafter occur to me as a result of my participation in this event or my travelling to and fro this event THE FOLLOWING PERSONS OR ENTITIES ; Championship Organising committee, event sponsors, event producers, race directors, event volunteers, all cities, countries, districts and / or states in which said event may be staged or which segments of said event may be run, and their (its) respective officers, directors, employees, representatives, agents and volunteers.
 - b. INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during the 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024,UDUPI,KARNATAKA.
4. I hereby consent to receive medical treatment which may be deemed advisable in any event of injury, accident and/ or illness during the 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024
5. I understand that the 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS - 2024 or related activities I may be photographed. I agree to allow my photo, video or file likeness to be used for any legitimate purpose by the event producer(s), event sponsor(s) and/or assigns.

6. This AWLR shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.
7. I understand that leg pulling/pushing/blocking swimmer is cheating and this practice is illegal in the 4th NATIONAL JUNIOR OPEN WATER CHAMPIONSHIPS -2024, UDUPI, KARNATAKA. I under take to participate as a true sportsman, and to compete without committing any sort/mode of cheating in this championship. If I am found guilty in this regard, I understand that I am liable for disqualification.
8. I agree to abide by the competition rules and understand that I should wear suitable sportswear for safety.
9. I hereby certify that I am _____ years of Age or older. I have read this document and I understand its contents.

Signature

Full Name

Date

(PARENT OR GUARDIAN READ WAIVER AND SIGN IF COMPETITOR IS UNDER 16 YEARS OF AGE)

If Parent / Guardian Signed on behalf

Competitors Name

Signature of Parent/ Guardian