

## HKGSA Water Polo Master Entry Form

Page      of

<b>Name of Meet:</b>	WINTER DEEP WATER POLO CHAMPIONSHIPS 2024	<b>Team Name:</b>	
<b>Date of Meet:</b>	2 March 2025	<b>Submitted by:</b>	
<b>Category:</b>	Men Open / Women Open / Boys U18	<b>Tel No:</b>	

Cap No.	Reg. No.	Family Name	Given Name	Gender (M/F)	DOB (MM/YY)	Age	*Position	**Handedness	Captain (✓)	#Declaration (✓)
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
Reserved										
Reserved										

#I hereby confirm that I am physically fit without any physical defect, and suitable to participate in the above activity. Organizer shall not be liable for any injury that may suffer in this activity.

Total no. of entries		Total amount (HKD):	
----------------------	--	---------------------	--

Authorize Signature	Authorize Chop

*Position	**Handedness	
CF: Center Forward	D: Driver	L: Left
CB: Center Back	GK: Goalkeeper	R: Right

For HKGSA Official Use Only:	
Accepted by:	
Date:	
Receipt No:	