

Goa Sea Pride 2026

Participant Name: _____

D.O.B. _____

Participating Events: _____, _____

Permission letter of participant / Guardian (If Swimmer is Minor) against risk

I, the undersigned, willingly agree to take part in the competition, on my own risk and responsibility. During competition, in case of any damage, accident, injury or death, the organizers will not be responsible. I will be wholly responsible for that. I have read and understood all rules and regulation of competition. If I fail to follow them during or after competition, I will accept the disciplinary action taken by organizers and will not argue against it.

Place: _____

Date: _____

Sign of Participant / Guardian: _____

Doctor's fitness Certificate

1) Name of Participant _____

2) Blood Group : _____

3) Height (cms) : _____

4) Weight (kg):_____

5) Any heart or lung disease? yes / no

6) Any major diseases? yes / no

Doctors Opinion: It is here by certified that Mr./

Mrs. _____ Is physically fit to participate in swimming event. His/Her lungs and heart are capable of taking extra stress of Swimming long distances.

Date : Seal & Signature of Doctor _____

Place :

(This document needs to be presented at the time of reporting)