

Maharashtra State Amateur Aquatic Association

Affiliated to
SWIMMING FEDERATION OF INDIA & MAHARASHTRA OLYMPIC ASSOCIATION

Mr. Anand Mane

Hon. President

Shashikunj, Near Mahaveer College
10 Vishalgadkar Parisar, Nagala Park,
Kolhapur, Maharashtra – 416003
Contact : +91 9822198002
Email ID : anandsmane@yahoo.com



Mr. Rajendra Palkar

Hon. General Secretary

18/B, 405 Ajinkya Apartment CHS,
Bimbisar Nagar, Goregaon(East),
Mumbai, Maharashtra - 400065
Contact : +91 9322862062
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1st Ratnagiri Ocean Swimathon – 2026 Conducted by Maharashtra State Amateur Aquatic Association along with Ratnagiri District Aquatic Association

PARTICIPATION FORM

Name in Capital Letters

Master / Miss / Mr. / Mrs. / Ms.: _____

Full Address: _____

Date of Birth: DD/MM/YYYY

Age: _____

Gender: Male/Female

Group: _____

Event: 1km / 2 kms / 5 kms

Contact No.: _____

Email ID: _____

Name & Signature of the Coach

Name, Signature of Secretary and Seal of District Association

Contact No.: _____

Contact No.: _____

Email ID: _____

Email ID: _____

MEDICAL CERTIFICATE

This is to certify that I have examined Master / Miss / Mr. / Mrs. / Ms.: _____ and found that He/She is Physically and Mentally fit to participate in swimming in the 1st Ratnagiri Ocean Swimathon – 2026, Conducted by Maharashtra State Amateur Aquatic Association along with Ratnagiri District Aquatic Association as per my knowledge and belief.

Date: DD/MM/YYYY

Doctor's Name, Signature, Stamp & Registration No.

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CONFIRMATION OF DATE OF BIRTH

This is to certify that _____ is a bonafide Student of our Institution /School/College and studying in _____. His / Her Date of Birth as per our records is DD / MM / YYYY

Name, Signature of Principal

Seal of School/college/Institution

INDEMNITY BOND

(Note: For Group VII & VIII the Indemnity Bond should be on Rs 100/- stamp paper & and notarized by notary)

I, Mr./Mrs. _____ will be participating in the 1st Ratnagiri Ocean Swimathon – 2026, Conducted by Maharashtra State Amateur Aquatic Association along with Ratnagiri District Aquatic Association in Ratnagiri, Maharashtra on Sunday 17th May 2026, for a distance of 1 km/2 km/5 km.

I hereby state/declare that I am taking part in this event at my own risk & consequences and shall not hold anyone else (Organization/ Institution/ Individuals) responsible in any manner in case of injury, accident including temporary & permanent disability or loss of life which may occur during or after the 1st Ratnagiri Ocean Swimathon – 2026, Conducted by Maharashtra State Amateur Aquatic Association along with Ratnagiri District Aquatic Association. Also,

I further declare that I have fully read and understood all the rules, regulations and conditions mentioned above and in the participation form, and I agree to abide by all the rules, terms and conditions of the event.

Date: _____

Coach Name & Signature

Participants Name & Signature

Witness 1

Witness 2

Name:

Name:

Address:

Address:

Contact No.:

Contact No.:

Email ID:

Email ID:

Signature:

Signature: