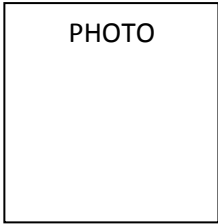


**UAESF Annual Registration Form**



Registration No.....

Club/School/Squad  
.....

Name.....Nationality.....

Date of Birth...../...../.....Place of Birth.....

Passport No..... Expiration Date..... /...../20.....

Address.....

Telephone.....Mobile.....

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**Request for Registration**

Mr. General Secretary of the UAE Swimming Federation:

We would like to register my Son/Daughter with the Club

of.....

Date...../...../20.....Signature.....

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**Medical Report:**

After a medical examination of the applicant, I confirm they are medically approved.

Date...../...../20..... Doctor's Signature.....

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**Request for Registration by Club/School/Squad**

Mr. General Secretary of the UAE Swimming Federation:

We would like to register the above applicant with our Club.

We pledge all information to be true and correct.

Date...../...../20.....Signature and Stamp.....

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**For Official Use Only**

Registrant's Application Approved.....

Registrant's Application Number.....

Date...../...../201.....

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