

**North Shore Swim Club
Specialty Meet
November 20-22, 2009**

Sanctioned by New England Swimming / Sanction # NE-09-89, NE-09-89TT

Name of Team: _____ **Abbreviation:** _____

Team Address: _____ **Phone:** _____

Coach: _____ **Phone:** _____ **E-Mail:** _____

Contact Person: _____ **Phone:** _____ **E-Mail:** _____

Number of Entries:

Women _____ x \$ 4.00 = _____

Men _____ x \$ 4.00 = _____

400 IM/500 Free/1000 Free _____ x \$ 5.00 = _____

Swimmer participation Fee _____ x \$ 5.00 = _____

Total: = _____

Entry Deadline: Receive by November 6, 2009

Make checks payable to: North Shore Swim Club

Mail entries to: North Shore Swim Club
19 Fenley Rd.
Gloucester, Ma. 01930

Any swimmer whose entry is accepted will, for him/herself, his/her heirs, executors and administrations, waive and release any and all rights and claims for damages he/she may have against United States Swimming, New England Swimming, North Shore Swim Club and Salem State College for any and all injuries suffered by him/her at said meet. **In submitting this entry the undersigned team certifies that all athletes in the entry are registered with USA Swimming and understands that the team may be fined \$100 for each swimmer in the entry that is not registered with USA Swimming.**

Authorized Club Signature

Title: _____