The Bluefish 2003 Memorial Weekend Classic

McDermott Pool, Warwick, Rhode Island May 24-25, 2003

Entry Form

Name of Team:					Abbreviation:		
Tea	m Address:						
Head Coach:					Phone:		
Contract Dengan					Email:		
Contact Person:					Phone:		
(Please include email addressto get news & confirmation)					Email:		
			Number of	Number of			
	Age Group	Gender	Swimmers	Entries	Rate*	Entry Fee*	
	12 & Under	Women			× \$3.50/\$4.00		
	12 & Under	Men			x \$3.50/\$4.00		
	Open	Women			x \$3.50/\$4.00		
	Open	Men			x \$3.50/\$4.00		
		T					
	Total	Women					
	Total	Men					
	All Swimmers						
By y who wait Swit Boos	mail entries to: A you signature below se entry is accept ye and release any mming, New Englo	lay, May 16 Attleboro Blud bw you acknow ted, will for by and all right and Swimming wn of Warwic	<u>, 2003</u> . Please efish; C/o Mary vledge on behal nimself/herself s and claims for the Attleboro	y Kass; PO Box 4 f of your team of his/her heirs of r damages he/s b Bluefish Swim	oyable to the Attle by Speries of the Attle by Foxboro, Ma Oxand its swimmers to rexecutors and a he may have agains Team, the Attleboany and all injuries	2035 hat any swimmer dministrators st United States oro Bluefish	
		Authorized Club Signature					
	Name:						