

**PIONEER VALLEY AQUATIC CLUB**  
**Senior Development Meet**  
**January 4<sup>th</sup>. 2003 – Springfield College, Springfield Ma**

Name of Team \_\_\_\_\_ Abbreviation: \_\_\_\_\_

Team Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Coach: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail Address (REQUIRED) \_\_\_\_\_

---

No. of Entries:            Female: \_\_\_\_\_ X \$3.50 = \_\_\_\_\_

                                 Male: \_\_\_\_\_ X \$3.50 = \_\_\_\_\_

                                 Relays \_\_\_\_\_ X \$10.00 = \_\_\_\_\_

Entry Deadline:    December 27<sup>th</sup>. 2002

Make check payable to: PVAC

Mail entry and check to: J.P. Galli. 27 Lyman Street. Apt 104 D, Springfield MA 01103

---

Whose entry is accepted will for himself, his heirs, or executors and administrators, waive and release any and all rights and claims for damages he/she may have against United States Swimming, New England Swimming Inc, Pioneer Valley Aquatic Club and Springfield College for any and all injuries suffered by him/her at said meet.

Authorized Club Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

---

Please list Officials who maybe interested in volunteering to help

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_