

**New Wave Swim Club
Nor'easter Classic
Haverhill High School Campus, Haverhill, MA
January 11 & 12, 2003
Sanctioned by New England Swimming**

Team Name: _____ Abbr.: _____

Head

Coach: _____ Phone: _____

E Mail Address: _____

Name and address of the person to receive all communication including meet results, warm-up changes and questions about entries:

Name: _____ Address: _____

City/Town: _____ State: _____ Zip: _____

Phone Number: Day: _____ Evening: _____

E-mail: _____

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ENTRY FEES

____ Individual Events @ \$3.50 or \$4.00 each (for hand entries) \$_____ TOTAL

PLEASE MAKE CHECKS PAYABLE TO NEW WAVE SWIM CLUB

MAIL HARD COPY & CHECKS TO: Ron Schneider, 13 Beverlee Street, Tyngsboro, MA 01879-1266

Contact Information of Individuals willing to Officiate:

Liability Release

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, New Wave Swim Club, Charles C. White Pool, Haverhill High School, and the City of Haverhill for any and all injuries suffered by him/her at said meet.

SIGNATURE OF AUTHORIZED TEAM OFFICAL

DATE