

# Attleboro Bluefish 2003 Winter Specialty Meet

Friday, Saturday & Sunday, January 24 to 26, 2003

## Entry Form

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

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

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

Email: \_\_\_\_\_

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

(Please include email address...to get news & confirmation) Email: \_\_\_\_\_

Age Group	Gender	Number of Swimmers	Number of Entries	Entry Fee*	Total
10 & Under	Girls			x \$3.50/\$4.00*	
10 & Under	Boys			x \$3.50/\$4.00*	
11 & 12	Girls			x \$3.50/\$4.00*	
11 & 12	Boys			x \$3.50/\$4.00*	
13 & 14	Girls			x \$3.50/\$4.00*	
13 & 14	Boys			x \$3.50/\$4.00*	
Open	Girls			x \$3.50/\$4.00*	
Open	Boys			x \$3.50/\$4.00*	
Total	Girls				
Total	Boys				
All Swimmers					

\* Add 50 cents per entry if NOT submitting entry using a SD3 data file.

**Entry Deadline: Thursday, January 16, 2003.** Please make checks payable to the **Attleboro Bluefish** and mail entries to: Attleboro Bluefish; C/o Mary Kass; PO Box 49; Foxboro, MA 02035

By your signature below you acknowledge on behalf of your team and its swimmers that any swimmer, whose entry is accepted, will for himself/herself, his/her 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, the Attleboro Bluefish Swim Club, Attleboro High School, the Town of Attleboro or any of their officers for any and all injuries suffered by him/her at said meet.

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

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

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