

Andover - North Andover YMCA Hurricane Sprints  
University of Connecticut, Storrs, Connecticut

June 11-13, 2004

TEAM NAME: \_\_\_\_\_ ABBR.: \_\_\_\_\_

COACH: \_\_\_\_\_ PHONE: \_\_\_\_\_

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

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

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

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ FAX: \_\_\_\_\_

Day: \_\_\_\_\_ Evening: \_\_\_\_\_

email: \_\_\_\_\_

**ENTRY FEES**

\_\_\_\_\_ Individual Events @ \$3.50 each \$ \_\_\_\_\_

\_\_\_\_\_ Distance events (400 Free and 400 IM) @ \$5.00 each \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Make check payable to:

**ANA Hurricanes  
C/O Paul Bennett  
165 Haverhill Street  
Andover, MA 01810**

**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, Connecticut Swimming, the Andover - North Andover YMCA, and the University of Connecticut for any and all injuries suffered by him/her at said meet.

\_\_\_\_\_/\_\_\_\_\_/04

Date

\_\_\_\_\_

Signature of Authorized Team Official