

**Belmont Aquatic Team  
Team Specialty Meet**

Northeastern University, Boston MA  
January 9-11, 2004  
Sanctioned by NE Swimming #NE-04-08

**CONTACT INFORMATION**

Team Name: \_\_\_\_\_ Abbreviation: \_\_\_\_\_  
Deck Coach: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Entries Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**ENTRY FEES**

_____ Individual Electronic Entries	@ \$3.50	=	\$ _____
_____ Individual Non-Electronic Entries	@ \$4.00	=	\$ _____
_____ Relay Electronic Entries	@ \$10.00	=	\$ _____
_____ Relay Non-Electronic Entries	@ \$10.50	=	\$ _____
			Total: \$ _____

Make check payable to: Belmont Aquatic Team

Mail entries and check to:  
Belmont Aquatic Team  
c/o Ed Conde, Entry Chairperson  
25 Eliot Street  
Watertown MA 02472  
617-924-8572

Entry Deadline: October 10, 2003  
*For e-mailed entries, this form and payment  
must be received within four business days  
of your entry e-mail.*

**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, Belmont Aquatic Team and Northeastern University for any and all injuries suffered by him/her at said meet.

\_\_\_\_\_  
Signature of Authorized Team Official

\_\_\_\_\_  
Date