CUDA TURKEY SHOOT
Team Specialty Meet
Sunday December 7, 2003
Sanctioned by New England Swimming

====> This form must accompany entries <====

Club Name_____ Abbreviation ⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

Club Address _____ City_____ State⌊ ⌋⌊ ⌋ Zipcode⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

Head Coach _____ Phone # ⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

Club Phone #⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋ E-Mail* _____ FAX #⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

* Results will be sent the following Monday AM if address furnished

Any swimmer whose entry is accepted will, for himself, his heirs, executors and administers, waive and release any and all rights and claims he may have against the Charles C. White Pool, Haverhill High School, the City of Haverhill, the New England Barracudas Swim Team and New England Swimming for any and all injuries suffered by himself at this meet.

Contact Person I (please print neatly) _____
Phone Number (Days) ⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋ (Evenings) ⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

Contact Person II (please print neatly) _____
Phone Number (Days) ⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋ (Evenings) ⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋-⌊ ⌋⌊ ⌋⌊ ⌋⌊ ⌋

Entries **should** be sent Certified mail, return receipt requested to: Turkey Shoot 2003, c/o 119 Andover St., Andover, MA 01810. Make checks payable to **CUDA's**

Amount Enclosed

Number of Events	Girls	_____	X $3.50 =		_____
Number of Events	Boys	_____	X $3.50 =		_____
Number of Events	Total	_____		Total	_____

Signature of Club Official _____ Position _____

Names of individuals willing to time/ officiate:

(Do not write below this line)
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