

EASTERN ZONE ALL STAR SWIM MEET
NEW ENGLAND SWIMMING August 10-13, 2005
Erie Community College Flickinger Aquatic Center and
University of Buffalo Alumni Arena Pool in Buffalo, NY

Please complete and submit to the verification table at the 2005 New England Long Course Championship Meets.

Name _____
 Legal first name _____ Middle initial _____ Legal last name _____
 Age _____ Birthdate _____ USA Swimming I.D. # _____
 Address _____
 City _____ State _____ Zip _____
 Your home e-mail address _____
 (All Zone Team correspondence will occur via e-mail)
 Phone (____) _____ home _____ cell _____
 Coach _____ Club affiliation _____
 Suit size Male-regular or jammer (Circle one) _____ Female _____
 Shirt Size _____ Sweat shirt size _____ Short size _____

Swimmers must have a minimum of two (2) Zone qualifying times in order to be considered for the New England Zone Team. Please list the times and events for which you have qualified as well as the 50 and 100 meter freestyle times (for relay consideration). ONLY long course meter times will be accepted (no converted short course times will be allowed). For verification, please list the meet at which each time was attained. Swimmers are allowed six events total – no more than three per day (this does not include relays).

Event 1 _____
 Event 2 _____
 Event 3 _____
 Event 4 _____
 Event 5 _____
 Event 6 _____
 50 Free _____ 100 Free _____

PLEASE NOTE: Swimmers who wish to compete in the Eastern Zone Open Water Swimming Competition may do so at their own expense. New England Swimming will not be responsible for meet entry, staffing or supervision of any kind for this competition. The deadline for applications for 12 and under swimmers will be at the conclusion of the 12 and Under Championship Meet at MIT, on Sunday, July 24th, 2005. The deadline for applications for 13 and over swimmers will be at the conclusion of the Open Championship Meet at MIT, on Sunday, July 31st, 2005. The meet entry deadlines that must be adhered to, thus there will be no exception to the swimmer application deadlines.

TRIP FEE **\$300.00 per swimmer (ages 11 and older)** *traveling with team*
\$100.00 per swimmer (10 and younger) *traveling with parents*
10 and younger swimmers who wish to travel on the team bus may do so only if accompanied by a parent and if room is available on the bus.. An additional fee of \$50.00 per person (\$50.00 for the swimmer plus \$50.00 for the parent) will be applied.

Date of receipt:
 Please complete the waiver form on the back to this application.

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Waiver of Liability

I hereby release New England Swimming, together with their operators, agents, employees, consultants, and instructors from any and all claims from injury or damage that may be sustained by me or my child during participation in the Eastern Zone Age Group All Star Swimming Competition..

I represent hereby that my child is in good health and capable of participating on the New England Zone Team and will not do anything which will injure himself/herself or others while engaged in the programs. I will hold New England Swimming harmless in connection with his/her participation.

If an accident or injury occurs, I will give New England Swimming or their representatives permission to obtain medical attention and/or required treatment.

Parents Signature _____

Date _____