

**Seekonk Swimming**  
**In association with Seacoast Swimming Association**

Mayers Natatorium, Seekonk MA

November 19-21, 2004

Sanctioned by NE Swimming # NE-04-74 and NE-04-74 TT

**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: Seekonk Aquatics, Inc.

Mail entries and check to:  
Seekonk Aquatics, Inc.  
c/o Ray Grant, Entry Chairperson  
80 Davis Street  
Seekonk MA 02771  
508-336-9982

Entry Deadline: November 12, 2004  
*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, Seekonk Aquatics, Inc., Seekonk Swimming and the Town of Seekonk for any and all injuries suffered by him/her at said meet. **In submitting this entry the undersigned team certifies that all athletes in the entry are registered with USA Swimming and understands that the team may be fined \$100 for each swimmer in the entry that is not registered with USA Swimming.**

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

\_\_\_\_\_  
Date