

Little Rhody Aquatic Club Team Specialty Meet

Community College of Rhode Island, Lincoln, RI
Feb 1-3, 2008

CONTACT INFORMATION

Team Name: _____ Abbreviation: _____

Deck Coach: _____ Phone: _____ Email: _____

Entries Contact: _____ Phone: _____ Email: _____

ENTRY FEES

_____ Individual Electronic Entries	@ \$4.00	=	\$ _____
_____ Individual Non-Electronic Entries	@ \$4.50	=	\$ _____
_____ Swimmer Participation Fee	@ \$5.00	=	\$ _____
			Total: \$ _____

Make check payable to: Little Rhody Aquatic Club

Mail entries and check to:
LRAC
c/o John O'Neill, Entry Chairperson
3 Ridgewood Road
Cumberland, RI 02864
401.447.9004

Entry Deadline: January 12, 2008
*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, Little Rhody Aquatic Club and Providence College 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