

**Cape Cod Swim Club
Team Specialty Meet
Massachusetts Maritime Academy, Buzzards Bay, MA
February 8-10, 2008
Sanctioned by NE Swimming #NE-08-19 and #NE-08-19TT**

CONTACT INFORMATION

Team Name: _____ Abbreviation: _____
Deck Coach: _____ Phone: _____ Email: _____
Entries Contact: _____ Phone: _____ Email: _____

ENTRY FEES

_____ Individual non-Distance Electronic Entries	@ \$4.00	=	\$ _____
_____ Individual non-Distance Non-Electronic Entries	@ \$4.50	=	\$ _____
_____ Individual Distance (400yds +) Entries	@ \$5.00	=	\$ _____
_____ Individual Distance Non-Electronic Entries	@ \$5.50	=	\$ _____
_____ Swimmer Participation Fee	@ \$4.00	=	\$ _____
			Total: \$ _____

Make check payable to: **CCSC**

Mail entries and check to:
Alan Sanders
PO Box 623
Buzzards Bay MA 02532

Entry Start Date: January 8, 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, Cape Cod Swim Club, Friends of the Cape Cod Swim Club and Massachusetts Maritime Academy 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

Officials attending meet: _____