

# Little Rhody Aquatic Club

## Team Specialty Meet

Community College of Rhode Island, Lincoln, RI

Jan 31-Feb1, 2009

### 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 @ \$7.00 = \$ \_\_\_\_\_

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