USA SWIMMING "Catch the Spirit" Camps - May 8, 2004

ATHLETE APPLICATION

Name:				
City, State & Zip:				
Phone & e-mail:				
Date of Birth:	Age:_	Male	Female	
USA Swimming Regis	tration #:			
Check One:				
Level I/II Camp at Mou	ınt Holyoke Colle	ge		
Level III Camp at Nort	heastern Univers	sity		
Club Name:				
Club Coach & phone #	#:			
MEDICAL and/or DIET	ARY CONSIDER	ATIONS: _		
Please list times in ya	rds: 100 free	100 or 2	00 IM	
*Swimmers applying t				
at least two events / ti				12&
Under Championships	s or the Open Ch	ampionshi _l	os:	
12	<u> </u>	·		
PLEASE RETURN TO:				

Amy Parratto / Camp Director "Catch the Spirit" LSC Camp 14 Back Road **Dover, NH 03820**

*Postmarked April 20th w/ \$20.00 check payable to: NE Swimming