

**North Shore Swim Club**  
**New England Swimming Regional Meet**  
O'Keefe Center, Salem State College, Salem, MA  
February 16-18, 2007  
Sanctioned by NE Swimming #NE-07-23 & NE-07-23TT

**CONTACT INFORMATION**

Team Name: \_\_\_\_\_ Abbreviation: \_\_\_\_\_  
Deck Coach: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Entries Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**ENTRY FEES**

_____ Individual Entries	@ \$4.00	=	\$ _____
_____ Distance (400 & longer) Entries	@ \$5.00	=	\$ _____
_____ Relay Entries	@ \$16.00	=	\$ _____
_____ NE Swimming Travel Fund	@ \$2.00	=	\$ _____
_____ Swimmer Participation Fee	@ \$5.00	=	\$ _____
			Total: \$ _____

Make check payable to: **North Shore Swim Club**

Mail entries and check to:  
North Shore Swim Club.  
c/o Dan Warner, Entry Chairperson  
19 Fenley Road  
Gloucester, MA 01930  
978-852-3985

Entry Deadline: February 7, 2007  
*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, North Shore Swim Club, Salem State College and the city of Salem 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 will be fined \$100 for each swimmer in the entry that is not registered with USA Swimming at the time of entry.**

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

\_\_\_\_\_  
Date