

**North Shore Swim Club
Halloween Classic
October 22-24, 2010**

Sanctioned by New England Swimming / Sanction # NE-10-81 (TT)

Name of Team: _____ **Abbreviation:** _____

Team Address: _____ **Phone:** _____

Coach: _____ **Phone:** _____ **E-Mail:** _____

Contact Person: _____ **Phone:** _____ **E-Mail:** _____

Number of Entries:

Women	_____	x \$ 4.00	=	_____
Men	_____	x \$ 4.00	=	_____
400 IM/500 Free/1000 Free	_____	x \$ 5.00	=	_____
Swimmer participation Fee	_____	x \$ 5.00	=	_____
		Total:	=	_____

Entry Deadline: Receive by October 8, 2010

Make checks payable to: North Shore Swim Club

Mail entries to: North Shore Swim Club
19 Fenley Rd.
Gloucester, Ma. 01930

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 and Salem State 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.**

Authorized Club Signature

Title: _____