

# 13 & OVER AGE GROUP CHAMPIONSHIPS

Blodgett Swimming Center, Harvard University  
March 13-16, 2003

TEAM NAME: \_\_\_\_\_ ABBR.: \_\_\_\_\_

COACH: \_\_\_\_\_ PHONE: \_\_\_\_\_ Email: \_\_\_\_\_

**Name and address of the person to receive all communication including meet results, timing assignments, warm-up changes and questions about entries:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ FAX: \_\_\_\_\_

Day: \_\_\_\_\_ Evening: \_\_\_\_\_ email: \_\_\_\_\_

---

---

### ENTRY FEES

\_\_\_\_\_ Individual Events @ \$5.00, or \$5.50 each (for hand entries) \$ \_\_\_\_\_

\_\_\_\_\_ Relay events @ \$10.00 each \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Make check payable to: **Mass Bay Marlins**

---

---

### NE SWIMMING TRAVEL FUND SURCHARGE

\_\_\_\_\_ Individual swimmers \* @ \$1.00 each \$ \_\_\_\_\_  
(include relay-only swimmers)

Make check payable to: **New England Swimming**

\* For any swimmer to compete, or be listed as a relay member, the swimmer's name must appear on the club's entry.

---

---

MAIL ENTRIES & CHECKS TO: **MASS BAY MARLINS, C/O Carol Healey, 47 May St. Needham, MA 02492**

Phone: (781) 444-2014

PAYMENT DEADLINE: Payment must be received by **SATURDAY, March 8, 2003 at 5:00 PM.**

---

---

**OFFICIALS:** Please list any Club Officials that would like to work at the meet. Include email and phone number.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 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, Mass Bay Marlins, and Harvard University for any and all injuries suffered by him/her at said meet.

\_\_\_\_\_/\_\_\_\_\_/03  
Date

\_\_\_\_\_  
Signature of Authorized team Official