2003 NCSA Junior National Swimming Championships

Official NCSA Master Entry Form

Woodlands, TX - August 12-16, 2003

Name of Team for Program: | | | | | | | | | | | | | | | | | | | | |

Official Team Name: | | | | | | | | | | | | | | | | | | | | | | | | | | |

Official Club Address: (Street) _____(City) _____(State) _____(Zip) _____

Coach: _____ Phone Office **(___)** _____ - _____ Home **(___)** _____ **-** _____

Home Address: (Street)_____ (City)_____ (State)_____ (Zip)_____

E-mail Address: _____

Is Head Coach attending meet? Yes or No Your Local Swimming Committee: _____

LSC Code: | | | LSC Assigned Team Code: | | | | |

ENTRY DEADLINE:

Send entry forms by overnight delivery no later than **Monday, August 4th, 2003.** Entry forms must be received on or before **Tuesday, August 5th, 2003**. Do not use the U.S. Postal Service's registered, certified or regular mail.

SEND ENTRIES AND CHECKS PAYABLE TO:

The Woodlands Swim Team
11111 Winterberry Place
The Woodlands, TX 77380

For Complete Information www.ncsa-usa.org Questions: e-mail to: ncsa_usa@hotmail.com

This entry blank is ____ of _____ entry blanks.

Women Individual events _____ x $10.00 = _____ **Women** Relay events _____ x $20.00 = _____
Men Individual events _____ x $10.00 = _____ **Men** Relay events _____ x $20.00 = _____

Entry Fee Total $ _____

CREDENTIALS

We have entered a total of _____ swimmers in individual events in the meet. (All names and information must be listed for each swimmer on this entry blank.)

PASSES

Deck	Spectator	
1	1	1-3 swimmers in individual events or 1 relay team
2	1	4-9 swimmers in individual events
4	2	10-20 swimmers in individual events
5	2	21-30 swimmers in individual events
6	3	31-40 swimmers in individual events
7	3	41-50 swimmers in individual events
8	5	51 or more swimmers in individual event

CHECKOFF LIST:

Entry forms with all times noted LC, SY or SM? _____
Check for **ALL** Fees? _____
All proper signatures? _____
Copies of **ALL** NTVs? _____

Unattached swimmers with a team are to be included in the above schedule even if listed on a separate entry blank.
Unattached swimmers not with a team are permitted one deck pass and one spectator pass.

Using the formula above, we wish to purchase _____ Spectator passes at $10 each, and we request ____ deck passes.

Credentials Total: $ _____

List names of coaches, chaperones, managers and/or trainers entitled to deck passes. Proof of appropriate USA Swimming membership is required for all deck passes. (See book for details)

1. _____ Position _____
2. _____Position _____
3. _____Position _____
4. _____Position _____

Totals: Entry Fees $_____
Spectator Passes $_____

Total $ _____ Please staple check to this entry blank.

The undersigned coach or team representative of all swimmers listed on this entry form hereby certifies that all times stated on this entry form are true and correct. The undersigned further assumes responsibility for any false or incorrect times, and acknowledges that a fine of $100.00 will be paid to the NSCA for each time that is false, incorrect, or unacceptable.

Coach/Team Representative Signature _____ 14 Digit Registration Number _____