



2005-2006 NATIONAL CAPITAL CUP SPRINT SERIES

THEME: 2006 SHORT COURSE SPRINT 4 SWIM MEET
"Sanctioned by Masters Swimming Ontario and open to all registered Masters swimmers over 18 years of age."

DATE: Saturday, April 8, 2006

LOCATION: UNIVERSITY OF OTTAWA
Montpetit Hall
125 University Private (west of King Edward St.)

TIME: 7:45 a.m. Warm-up
8:30 a.m. Start
11:00 a.m. Finish

AWARDS: Ribbons and Certificate of Achievement Award for each age group

FREE Breakfast after swim meet

Entry Fee: \$25.00 flat fee----**LATE DECK ENTRY \$30.00**

Entries: To be filled out on SNC entry cards by Wednesday, March 29/2006

Events: Events Seeded by Time
Individual Events - Men & Women Mixed
Heats Swum Slowest to Fastest

Cheque to be made payable to:

TECHNOSPORT
1094 Castle Hill Cresc.
Ottawa, Ont. K2C 2A8

Phone: (613) 769-4204

E-mail: info@technosport.ca

Web Site: www.technosport.ca (online registration)

2006 SHORT COURSE SPRINT 4 SWIM MEET

Saturday, April 8, 2006

SCHEDULE OF EVENTS

Please Enter Entry Time

1. 200, 400, 800 Mixed, Free or Medley Relay, Men and/or Women .._____
2. 400 Free....._____
3. 200 I.M....._____
4. 100 Fly....._____
5. 50 Back....._____
6. 200 Free....._____
7. 50 Breast....._____
8. 50 Free....._____
9. 100 Breast....._____
10. 100 Free....._____
11. 50 Fly....._____
12. 100Back....._____
13. 200, 400, 800 Mixed, Free or Medley Relay, Men and/or Women .._____

ATHLETE WAIVER & RELEASE

In consideration of the acceptance of this entry, I for myself, my executors, administrators and assigns, do hereby release and discharge the TECHNOSPORT Masters, Master Swimming Ontario and Master Swimming Canada from all claims and damages, demands and actions whatsoever in any manner arising or growing out of my participation in this event. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate.

Name: _____ Club _____ MSO# _____
Or other affiliation
Address: _____ Age as of Dec.31 2006: _____
City: _____ Prov: _____ Postal Code: _____
Phone: (H) _____ (W) _____
e-mail: _____