Mail entry and fees to:

2000 USMS National Short Course Championships Official Entry Form

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## Indiana University Natatorium

logo

## Indianapolis, Indiana April 27-30, 2000

Sanctioned by the Indiana LMSC for USMS, Inc. Sanction number: 160S0002

Name*			USM	S Reg. #		
	Last	First	Middle Initial	(Foreign en	tries include Masters 1	registration card)
Address						
	Street		City	State	ZIP	Country
E-mail		Day Phone		Eve. Phone		
Emergency		A/C	Age	Birthdate_	A/C	Sex
	Name	Phone No.	(on 4/30/00)		(Month/Day/Year)	M/F
Club Name			Clu	b Abbreviati	on	

\*Print name as it appears on USMS registration card.

## **BEFORE COMPLETING, READ "MEET INFORMATION" ON PREVIOUS PAGES.** *Entries must be U.S. postmarked by March 17, 2000 or received by March 24, 2000.*

Event No.	Entry Time Women	Т	6	Event	Event No.	Entry Time Men	Т	6 Entry Che	cklist
	Warm-Up 6:30 - 7:45	5 a.m	,	THURSDAY, APRIL 27, 2000	1	Start 8:00 a.m.		$\Box$ Entry for	
1				1000 FREESTYLE**	2			out complet	0
3				1650 FREESTYLE**	4			$\Box$ "T" and	
	Warm-Up 6:30 - 7:45	5 a.m	,	FRIDAY, APRIL 28, 2000		Start 8:00 a.m.		clearly mar	
5				50 BACKSTROKE	6			is for NQT	
7				100 BREASTSTROKE	8			been met. M	
9				200 FREESTYLE	10			only if enter events.)	rıng 6
11				100 BUTTERFLY	12			$\Box$ Seed tim	es in nron-
13/14	SEE RELAY FORM			200 MIXED MEDLEY RELAY	13/14	SEE RELAY FORM		er columns	
15	SEE RELAY FORM			200 FREESTYLE RELAY	16	SEE RELAY FORM		□ No more	than three
17				400 INDIVIDUAL MEDLEY**	18			events per d	day
	Warm-Up 6:30 - 7:45	5 a.m		SATURDAY, APRIL 29, 2000		Start 8:00 a.m.		entered?	_
19				500 FREESTYLE (WOMEN)**	N/A	MEN'S 500 SUN.		$\Box$ Liability	
21				100 BACKSTROKE	22			signed and	
23				50 BREASTSTROKE	24			"YMCA Ind	
25				200 INDIVIDUAL MEDLEY	26			SwimFit" e	~
27				50 FREESTYLE	28			🗌 🗆 Internati	onal per-
29				200 BUTTERFLY	30			mit attache	
31/32	SEE RELAY FORM			200 MIXED FREE RELAY	31/32	SEE RELAY FORM		$\Box$ SASE en	
	Warm-Up 6:30 - 7:45	5 a.m	,	SUNDAY, APRIL 30, 2000		Start 8:00 a.m.		(Indicate p	urpose on
N/A	WOMEN'S 500 SAT.			500 FREESTYLE (MEN) **	34			envelope.)	stmarkad
35				100 FREESTYLE	36			by March 1	
37				200 BREASTSTROKE	38			or received	
39				50 BUTTERFLY	40			24, 2000 de	eadline?
41				200 BACKSTROKE	42			QUESTIO	
43				100 INDIVIDUAL MEDLEY	44			(317)253-8	
45	SEE RELAY FORM			200 MEDLEY RELAY	46	SEE RELAY FORM		9 p.m. EST.	
	**Che	ck-in	requi	red: See Meet Information. You may enter	r either the 1	000 Free or the 1650 Fr	ree, not	t both.	

Liability Release: "I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters Swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDI-TION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATION AT THE MEST COMMITTEES, OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS."

Signature_
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Date

Check or money order payable to: "YMCA Indy SwimFit"