

Swimming for Wishes – An Open Water Experience

5K Swim Down St. Croix River



Sunday, August 26, 2012

Stillwater to Bayport, MN

Hosted by: Make-A-Wish Minnesota

Sanction # 302-W004



(ONLINE REGISTRATION IS PREFERRED)

EVENT: SWIMMING FOR WISHES:

The course is a straight swim down the St. Croix River, starting in front of The Freight House (Stillwater, MN) and finishing in Lakeside Park's sandy beach (Bayport, MN). The straight-line distance between both locations is 5-K. Individual swimmers will swim the full distance.

LOCATION/FACILITY: St. Croix River, starting at Lowell Park, next to [The Freight House](#), located in 305 Water St. S, Stillwater, MN 55082. Directions to event location: <http://fhstillwater.yolasite.com/directions.php> River temperature in late August is usually between 72-75 F.

CHECK-IN & START TIMES (CST)

- Race Day CHECK-IN: 7:30 AM
- Mandatory Technical Meeting: Sunday, August 26, 2012 at 8:00 AM at Lowell Park (next to the Freight House).
- First swimmer starts at 8:30 AM (swimmers start every 20 seconds)

ELIGIBILITY:

- This is a USMS-sanctioned event. All participants must be 18-years or older as of August 26, 2012 and be a 2012 registered member of USMS or equivalent FINA organization for foreign swimmers, or must have a USMS "One-Event" registration.
- All swimmers must be able to complete the 5-K swim within 2.5 hours.

RULES: Current USMS rules will govern this event. Wet suits are allowed. Other swimming aids are allowed, but swimmers will not be eligible for awards.

ENTRY FEES (Online Entry is preferred)

Aside from the USMS registration requirements (see above ELIGIBILITY section), each swimmer is encouraged to fundraise in order to participate. In lieu of a registration fee we are asking that each swimmer either donates or fundraises \$250. At this time, if the \$250 is not met, there are no fundraising obligations and you will still be able to participate via the Swimming for Wishes event. If you would like help with fundraising ideas, we will be happy to help.

Event registration will close when 100 entries have been received. Participation includes: T-shirts, swim caps and snacks. **You must sign up before July 27th in order to receive a T-shirt. NO REFUNDS FOR ANY REASON!**

START/FINISH: Swim will start at Lowell Park (Stillwater, MN) and finish at Lakeside Park's sandy beach (Bayport, MN).

TIMING: Manual timing with three back-ups. All finish times recorded and matched to finish order (by race number).

RESULTS:

Results will post when available at www.USMS.org and www.mn.wish.org.

SAFETY: There are boats on this river (boaters, skiers, fishers, etc.). A team of kayakers will be supporting the swim and will be part of the safety team monitoring the swim. Personal escorts will be allowed if the paddler is qualified and understands the river and currents. Safety boats and lifeguards will also monitor the entire course. Swimmers must wear event cap and numbers on arms and back for identification. Medical personnel will be at start, on the course and at the finish line. Athletes will enter the water only after being identified and recorded by race number by a race official. In case of severe weather or other safety issue, the race may be postponed, cancelled or abandoned without refund. Safety info: www.mn.wish.org/swimmingforwishes/safety

SEEDING:

All swimmers will be asked to provide a real or estimated seedtime during registration. The Event Director will assign starting times accordingly.

AWARDS:

Awards created by a wish child, in collaboration with a local artist, will be given to the top 3 FUNDRAISERS. The top male and top female finishers will also receive an award.

DIRECTIONS: For directions to event location, please visit <http://fhstillwater.yolasite.com/directions.php>

PARKING: Meter parking will be available at Lowell Park (race start). Please visit <http://stillwaterparking.com/> for other parking options

SCHEDULE OF EVENTS

The schedule of events will soon be posted at www.mn.wish.org. Please be sure to visit it often for updates!



**Entry Form
SWIMMING FOR WISHES
5K Swim Down St. Croix River
Sunday, August 26, 2012**



Online entry is preferred: www.mn.wish.org

Name _____ Street Address _____
 City _____ State _____ Zip _____ DOB ____/____/____ Age _____ Gender M F (circle)
 Email: _____ Phone: _____ USMS # _____ CLUB _____
 Emergency Contact Person: _____ Emergency Phone: _____

Attach copy of USMS card with paper entry.

One T-Shirt included with entry fee (adult sizes; please select): XS S M L XL XXL
 Note: You must sign up before July 27th in order to receive a T-shirt.

My anticipated swimming time is: _____ (you may share a previous swim result - i.e. 1 mile)

In lieu of a registration fee we are asking that each swimmer either donates or fundraises \$250. At this time, if the \$250 is not met, there are no fundraising obligations and you will still be able to participate via the Swimming for Wishes event. If you would like help with fundraising ideas, we will be happy to help.

Please read and sign: 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 CONDITION 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, THE MAKE-A-WISH FOUNDATION OF MINNESOTA, THE MAKE-A-WISH FOUNDATION OF MINNESOTA'S VOLUNTEERS, PARTNERS, SUPPORTERS AND FRIENDS, HOST FACILITIES, INCLUDING WASHINGTON COUNTY, MEET SPONSORS, MEET COMMITTEES OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS. Finally, I specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

Swimmer's Signature: _____ **Date:** _____

Please read and sign: AUTHORIZATION AND EVENT PROMOTION RELEASE (Media Release)

I, the enrolled participant agree to be filmed, photographed, taped, quoted or otherwise mentioned (without compensation) by the Event Director (also known as Meet Director), or by anyone authorized by the Event Director. This includes but is not limited to the official and authorized photographers, writers, hosts, or sponsors of this event under the conditions authorized by the Event Director. I give the Event Director, and anyone authorized by the Event Director, the right to use (without compensation) my name, picture, likeness, quotes, and biographical information, whether audio or visual, before, during and after the period of my individual or team participation in this event. I will not promote third party sponsors, causes, or charities unless pre approved by the Event Director. I understand that there will be no refunds given for any reason including event cancellation.

Swimmer's Signature: _____ **Date:** _____

Please send a copy of this completed form to Katrina Sletto by email at ksletto@wishmn.org or by fax (612-767-2768). For questions, please call 612-767-2755. Thank you!