

For youth development® For healthy living For social responsibility

Sussex County YMCA

"Adult Mini Meet"

Sussex County YMCA Hardyston, NJ

Saturday, October 20, 2012

New Swimmer Orientation Meeting 2:00-2:30 pm 2:30 pm – Check-in

Recognized by The New Jersey Swimming LMSC for USMS, Inc. #072-R002

Facility: The Sussex County YMCA six lane 25 yard pool. Timing will be done with a Colorado Timing System with manual backup.

Directions:

From Route 23: Go to Hamburg; take Route 94 South to Wits End Road on right (approx. 2 miles). Follow Wits End Road to YMCA driveway.

From Intersection of Routes 15 & 94: Go North on Route 94 towards Hamburg. Follow Route 94 to Wits End Road on left (approx. 5 miles). Follow Wits End Road to YMCA driveway.

Schedule: 2:00 pm New Swimmer Orientation Meeting, 2:30 pm check-in, 3:00-3:30 pm Warm-up, 3:30 pm start.

Warm-ups: No diving is permitted during warm-up, except in the designated one-way sprint lane(s).

Entry Limit: Swimmers may register for a maximum of 4 events.

Seeding: All events will be pre-seeded. Events will be run in heats, slowest to fastest, with men and women swimming together. Entries with "No Times" (NT) will be seeded in the slowest heat.

Age Groups: Individuals: 18-24, 25-29, 30-34, etc. through 90+.

Eligibility: Open to any adult interested in participating in a swim meet. Swimmers must be 18 years of age on the date of the meet. If you are a member of USMS, a copy of your USMS card needs to be submitted with your entry form.

Awards: Ribbons for 1st through 3rd places; all others will get a label with their official time.

Timing: In the unlikely event that a malfunction occurs in the automatic timing system, the meet will continue on schedule with the use of alternate (stopwatch) timers.

Entry Fees: \$12.00 per swimmer to register and \$5.00 per event.

Registration: All entries must be received by Friday, October 12, 2012 <u>NO</u> <u>exceptions</u>. Any entries received after October 12th will be returned. Any questions, please call Debbie Soutter, at 973 209-9622, ext. 223.

Entry Form - Adult Mini Meet-October 20, 2012

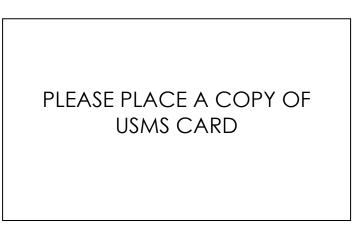
Entry form must be received by Friday, October 12, 2012.

(In order for your results to be posted to the NJ Masters Swimming you must include a copy of your USMS card).

	Age as of 10-20-12:Sex:
Name:	Date of Birth:
	E-Mail
Address:	Address:
	Evening
	Phone:
Day time	USMS number(if applicable):
Phone:	

RELEASE OF LIABILITY BY PARTICIPANT:

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, HOST FACILITIES, 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. (Rule Book Article 203.1)



Signature: ____

__Date: ____

Please enter your best short course **yard** times for each event you wish to swim (put "NT" in the blank for No Time)

	•			* 200 relay-Free
Event	Entry Time	Event	Entry Time	Yes, Place me on a
 50 Free 100 Fly 50 Breast 100 Back 200 IM 		 6. 100 Free 7. 50 Fly 8. 100 Breast 9. 50 Back 10. 200 Free 		Team. I have my own team. Please list all participants.
Entry Fee <u># of Events x s</u> Total enclosed			_ Check (payable	All participants must be entered in meet. to Sussex County YMCA)
Credit Card (circ	cle one) VIS	SA MC Disco	over AMEX	Sussex County YMCA
Card #			Exp Date:	15 Wits End Rd / Hardyston, NJ 07419
-				Phone: 973 209-9622 Fax: 973 209-1483 www.sussexcountyymca.org
Office Use only:	Member/Non-M	lember Receipt	# St	taff Initial