iSWIM Fall Invitational Sprint Swim Meet

Saturday October 5, 2013; Sanction # xxx-xxxx

Hosted by iSWIM Master Swim Team

**LOCATION**: Purdue University Boilermaker Aquatic Center, Purdue University, West Lafayette, IN 47907

**FACILITY**: Boilermaker Aquatic Center is an indoor 50 meter pool. The pool configuration for the meet will be eight (8) 25 yard lanes for competition, with eight (8) 25yard lanes which will always be available for warm up and cool down. There is permanent seating for 625 spectators. Daktronics timing will be used for this event.

**MEET CONDUCT**: Current USMS rules will govern the conduct of the meet.

**ELIGIBILITY**: All entrants must be registered with United States Masters Swimming, Inc. Each swimmer is eligible to swim a maximum of five events, excluding relays.

**AGE GROUPS**: 18-24, 25-29, 30-34, 35-39, 40-44, etc.

**ENTRY FEES**: $25 Online; $35 Deck Entries

**DEADLINE**: Online entries close Friday, October 4th at 11:59 PM. Online registration can be found at the following website – www.xxxxxxxx.com

**SEEDING**: All heats will be seeded slowest to fastest.

**AWARDS**: Each participant will receive a commemorative card suitable for posting individual and relay results.

**ORDER OF EVENTS**

***Women’s events are ODD numbers; Men’s events are EVEN numbers.***

**Deck Entries: 11:00 – 11:45 Warm-ups: 11:00 AM Meet Begins: 12:00PM**

|  |  |  |
| --- | --- | --- |
| **WOMEN** | **EVENT** | **MEN** |
| **1** | **200 yd Medley Relay (mixed)** | **2** |
| **3** | **50 yd Freestyle** | **4** |
| **5** | **100 yd Backstroke** | **6** |
| **7** | **200 yd Individual Medley** | **8** |
| **9** | **50 yd Butterfly** | **10** |
| **11** | **100 yd Freestyle** | **12** |
| **13** | **100 yd Breaststroke** | **14** |
| **15** | **50 yd Backstroke** | **16** |
| **17** | **100 yd Butterfly** | **18** |
| **19** | **200 yd Freestyle\* (mixed)** | **20** |
| **21** | **50 yd Breaststroke** | **22** |
| **23** | **100 yd Individual Medley** | **24** |
| **25** | **200 yd Freestyle Relay (mixed)** | **26** |

*\* Any Stroke can be swum in this event if you want a time in something other than freestyle.*

**INFORMATION:** All questions should be directed to [iSWIMmasters@gmail.com](mailto:iSWIMmasters@gmail.com).

**ENTRY FORM**

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEX \_\_\_\_ AGE \_\_\_\_ BIRTHDATE\_\_\_\_\_\_\_\_\_\_\_

USMS membership # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE/ZIP\_\_\_\_\_\_

PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEAM\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ USMS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVENT NUMBER EVENT NAME SEED TIME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

FEES: $25 for up to 5 events ($35 for deck entries)

Make checks payable to **iSWIM, Inc.**

RELEASE FROM LIABILITY: 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 INCIDENTTHERETO, 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 Article203.1)

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail-in entries can be sent to:

iSWIM, Inc.

c/o Mike Groaning

1875 Secretariat Dr

West Lafayette, IN 47906