

4th Annual Stephen Billeaud Memorial Swim Meet (Lafayette)

Date: Saturday, April 26th 2014 **Host:** Crawfish Aquatics (Lafayette)

Times: Warm Up 9:00-9:45AM. 9:50-9:55 Ceremony in honor of Stephen Billeaud. Meet Starts 10:00 a.m.

Facilities: Outdoor 8 lane 25 yard course, 4 feet depth to 6.5 foot depth & a 4-lane 25 meter indoor pool available for warm-up & cool down during the meet. Crawfish Aquatics 107 Susan Street Lafayette. LA 70506

The length of the competition course is not on file with USMS. Eligibility of times achieved in this meet will be contingent upon pool length measurement and approval with USMS; if bulkheads are present, their placement must also be confirmed by measurements at the meet. (USMS articles 105.1.7 and 107.2.1).

Rules/Eligibility: 2014 USMS Rules shall govern. All participants must be registered with United States Masters Swimming. A copy of your USMS card is required with the completed entry.

Age Groups: 19-24, 25-29, 30-34, 35-39, 40-44, etc (increasing in five-year increments).

Results: Will be available after the meet on the Internet at www.crawfishaquaticslafayette.com

Director: Thomas Clavier thomasplavier@gmail.com (504)236-4005

Seeding/Prediction: Swimmers will be seeded slowest to fastest by predicted cumulative time as noted on the entry form. If no predicted time, put NT.

Meet Entry: Entry fee \$30.00 payable by check to Crawfish Aquatics. Paper entries must be postmarked by April 14, 2014. No late entries will be accepted. Mail completed entry form, copy of USMS card, and check to Crawfish Aquatics, ATTN: 4th Annual Stephen Billeaud Memorial Swim Meet, 107 Susan Street, Lafayette, LA 70506.

Emailed Entries: Entries may also be submitted via email to thomasplavier@gmail.com. Please be sure to attach a scanned copy of entry form along with signature on waiver. For payment just pay the entry fee when you arrive to the meet.

****ENTRY FORM** 4th Annual Stephen Billeaud Memorial**

Name: _____ Age (as of **4/26/2014**): _____ Sex: _____

Address: _____ City/State: _____

Zip Code: _____ Phone: _____ USMS #: _____

Team Name: _____ Team Abbreviation: _____

Email Address: _____

Swimmers may swim a maximum of 5 races.

Event Name	Event Order	Entry time (does not have to be precise)
100 IM	1	
200 Butterfly	2	
100 Back	3	
50 Breast	4	
200 Free	5	
100 Fly	6	
50 Back	7	
200 Breast	8	
100 Free	9	
50 Fly	10	
200 Back	11	
100 Breast	12	
50 Free	13	
200 IM	14	
There will be a 10 Min break before the start of the distance events Choice of (500,1000 or 1,650)	15	

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 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 FOR DAMAGES CAUSED BY 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."

Signature: _____ Date: _____