

Great Bay Masters Summer Meet at Jenny Thompson LCM Pool

Dover, NH – Sunday -June 22, 2014

Date: Sunday, June 22, 2014

Information:

GreatBayMastersSwimTeam@gmail.com

Sanction Number: pending

Location: Jenny Thompson 50 Meter Outdoor Pool,
150 Portland Ave., Dover NH 03820

Deck-Entry: Deck-Entry between 7:30 and 8:30 a.m.;
Entries NOT accepted after 8:30 a.m.

Warm Up: 8:00 a.m. to 9:00 a.m., meet must be done
by noon

Facility: 6 lane 50 meter competition pool, with
additional space for warm up / warm down

Entry Procedure: Enter five individual events
maximum. Deck enter or US mail your entry with
payment by check to: **GBM, PO Box 1723, Dover NH
03821**. Mail must be received **by June 18, 2014**; no
check-in required if your US mail entry and check are
received before the deadline.

Fees: For entries *and* payment by check received via
US **Mail by June 18, 2014**: \$20. Deck Entries will be
charged \$30. There will be no refunds. There is no
charge for relays but swimmers must be entered in at
least one individual event to be eligible for relays.

Eligibility: 2014 registered United States Masters
Swimming (USMS) swimmers 18 years or older as of
June 22, 2014, and 2014 registered masters swimmers
from other countries.

Timing: Electronic timing planned with hand watch
backup timing. Notify meet personnel if you think you
could set a USMS national record or FINA masters
world record.

Event Order: See Meet Entry Form.

Relays: The four relay participants on each relay must
be members of the same USMS club. USMS
“unattached” swimmers may not participate on relays.
Relay age group is determined by the sum of the ages

of the four participants. The deadline for submitting
relay entry forms will be announced at the meet. Relays
will be canceled if they cannot be completed by noon.

Directions: For GPS / web based map tools use this
address – Jenny Thompson Outdoor Pool, 150 Portland
Ave. Dover, NH 03820.

General directions – from Route 95 in New Hampshire
take the Spaulding Turnpike (Route 16) North. Take
exit 8E off the Spaulding. Follow to third light, a "T"
intersection. Turn left. Proceed to next light. Go
through the light. Follow around bend, see small white
sign for Rt. 4 (Portland Ave.) Take a right. Go about
2/3 mile, see Philbrick's sports store on right. The pool
is directly across the street.

Day of the meet Notes:

- 1) Your age for this meet is your age on Dec 31, 2014.
- 2) Seed times submitted must be for meter distances. If
you need help converting your times from yards to
meters, ask meet personnel.
- 3) Children may not swim in the warm-up / warm-
down area during the swim meet. Only USMS
registered swimmers entered in the meet may use the
warm-up / warm-down area.
- 4) Everyone can get a good warm-up during the open
pool warm up if each lane has people of the same
speed. Select your warm-up lane based on your
continuous swimming warm-up pace per 50 YARDS:
Lane 1 - 60 seconds, Lane 2 - 50 seconds, Lane 3 - 40
seconds, Lane 4 - 35 seconds, Lane 5 - 45 seconds,
Lane 6 - 55 seconds, if you are warming up in an
inappropriate lane, an official will ask you to move.

PROOF OF USMS REGISTRATION POLICY:

- If you are USMS registered with a USMS club
outside the New England LMSC, then you must submit
a photocopy of your USMS registration card.
- If you are NOT in the copy of the NE-LMSC
registration list at the meet and you do not have a valid
USMS registration card, then you **MUST FILL OUT A
USMS REGISTRATION FORM AND SUBMIT
PAYMENT AT THE MEET, OR YOU WILL NOT BE
ENTERED IN THE MEET.** This includes the situation
where a swimmer has recently mailed a USMS
registration to the NE-LMSC registrar, but that
registration was not processed before the copy of the
NE-LMSC registration list was provided to the meet
management team.

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Deck-entry from 7:30 to 8:30 a.m.; warm-up from 8:00 a.m. to 9:00 a.m, Sanction Number: pending

Name _____ Birth Date: ____/____/____ Age on 12/31/14 _____

Address _____ Phone: _____

Email: _____ Emergency Contact: _____

USMS registration number _____ Gender: Male Female

USMS club:

- GBM
- MESC
- NEM: Workout group: _____
- Other Club*: _____ LMSC: _____

(*If your club is NOT listed, a copy of your USMS card must be submitted)

Must submit a **seed time** for each event entered

*Enter **five** individual events maximum. No charge for relays but swimmers must be entered in one individual event to participate on relays.*

MEET ENTRY FEES

- Mailed Entry: \$20.00
(mail must be received by **June 18, 2014**)
- Deck-entry: \$30.00

Checks payable to Great Bay Masters.

Mail entry forms to:

Great Bay Masters
PO Box 1723
Dover, NH 03821

Event #	Seed Time (meters)	Description
1		Mixed 200 Free
2		Mixed 100 Back
3		Mixed 200 Breast
4		Mixed 100 Fly
5		Mixed 50 Free
6		Mixed 50 Breast
7 – 9	----	400 Medley Relay
10		Mixed 200 Back
11		Mixed 100 Breast
12		Mixed 200 IM
13		Mixed 100 Free
14		Mixed 200 Fly
15		Mixed 50 Fly
16		Mixed 50 Back
17-19	----	400 Free Relay
20*		Mixed 400 Free*
21*		Mixed 400 IM*
22*	----	Mixed 800 Free Relay*

**Events 20-22 will be conducted if time permits. Swimmers may not enter both the 400 free and 400 IM. Heats of the 400 free and 400 IM may be combined.*

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 of 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.

Date _____

Signature _____

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RELAY FORM

Circle Relay:

400 Medley 400 Free 800 Free Relay* (*time permitting)

Circle Relay Gender:

Male Female Mixed (2 women, 2 men, any order)

USMS Club: _____ Label (A,B,C,...): _____

Seed Time: _____

Note: All four swimmers must be from the same USMS club. Unattached swimmers may not compete on relays. Label each relay in an event with a letter (“A”, “B”, “C”, etc.). Example: in the 400 Free Relay your USMS Club has 2 men’s, 2 women’s and 2 mixed relays. Label the six 200 Free Relays “A” through “F”. Swimmers may not swim on both a single gender and mixed gender relay for the same relay event.

Swimmers (in correct order):

Age on 12/31/14:

1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

Sum of Ages: _____

Circle Relay Age Group:

72-99 100-119 120-159 160-199 200-239 240-279 280-319 320-359

The *sum of ages* of the relay participants determines the age group!

Check here to make lead off time official: X

If the second swimmer starts in the water, please indicate here: _____

If the second swimmer starts in the water no relay split time will be granted since the touch pad will be hit early.