**MAIL IN ENTRY FORM**

**O\*H\*I\*O MASTERS PENTATHLON SWIM MEET - SHORT COURSE 25 YARDS**

**AKRON GENERAL HEALTH & WELLNESS CENTER - NORTH**

**OCTOBER 26, 2014**

**USMS SANCTION: # \_\_\_\_\_\_\_**

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEX \_\_\_ AGE ON Oct 26, 2014 \_\_\_\_ BIRTHDATE \_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_ ZIP \_\_\_\_\_\_\_

PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEAM \_\_\_\_\_\_\_ or UNattached \_\_\_\_ USMS #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (with copy of card)

Enter one Pentathlon Event - either the Mini-Pentathlon (50’s with the 100 yard IM) or the Maxi-Pentathlon (100’s with the 200 yard IM). You can also swim individual events if you do not wish to swim the Pentathlon. (maximum of 5 events) Please enter seed times or "No Time." for each of your events.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  | **SEEDTIME / BEST GUESS** |  |
| # | EVENT | MINI-PENTATHLON | MAXI-PENTATHLON |
| 1 | 50 BUTTERFLY |  |  |
| 2 | 100 BUTTERFLY |  |  |
| 3 | 50 BACKSTROKE |  |  |
| 4 | 100 BACKSTROKE |  |  |
|  |  | **15 MINUTE BREAK / WARM UP** |  |
| 5 | 50 BREASTSTROKE |  |  |
| 6 | 100 BREASTSTROKE |  |  |
| 7 | 50 FREESTYLE |  |  |
| 8 | 100 FREESTYLE |  |  |
|  |  | **15 MINUTE BREAK / WARM UP** |  |
| 9 | 100 INDIVIDUAL MEDLEY |  |  |
| 10 | 200 INDIVIDUAL MEDLEY |  |  |
|  | **10 MINUTE BREAK / WARM UP** | | |
| 11 | 200 MEDLEY RELAY |  |  |
| 12 | 400 MEDLEY RELAY |  |  |
|  |  |  |  |

**ENTRY FEES:** Paper Entry O\*H\*I\*O Masters Member $30.00 = \_\_\_\_\_\_

Paper Entry NON - O\*H\*I\*O Masters Member $40.00 = \_\_\_\_\_\_

ALL DECK Entries $50.00 = \_\_\_\_\_\_

**Deadline : Deadline for Online Entries is Noon, Saturday, October 25, 2014. Paper entries must be received by Wednesday, October 22, 2014.** For paper entries make checks payable to: **O\*H\*I\*O MASTERS SWIM CLUB.** Mail to: Meet Director, P.O. Box 43824, Cleveland, Ohio 44143

**Release by Participant 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 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.

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

Sanctioned by Lake Erie LMSC for USMS,Inc. # **\_\_\_\_\_\_\_\_**