

Blue Dolphins Masters Invite
25 yard timed finals
August 22, 2015

Looking forward to starting a masters tradition in Oviedo. First meet, let's have some fun and fast swims!

Sanctioned by Florida LMSC, Sanction # 145-S013

Sponsored by Blue Dolphins

Date, Times, Warm-up:

Saturday Aug 22, 2015

Warm-up: 8:00 am

Competition: 9:00 am

Purpose: To have fun swimming

Location: 148 Oviedo Blvd, Oviedo Fl 32765

Pool Specs: 10 lane 25-yard outdoor cooled pool (8 lanes for competition, 8 for warm-up, cool down).

Eligibility: Open to all USMS

Seeding: Please enter a SCY time for each event (even if it is an estimate).

Entry Limit: Four (4) individual events plus relays.

Entry fee: \$30 includes facility fee and events.

Entry deadline: Entries must be received by Aug 16.

Paper entries:

Complete the entry form below (both pages) and make checks (\$30 per swimmer) payable to USRP Racers. **Mail entries to**

Charlie Rose

762 Live Oak Lane,

Oviedo, Fl 32765

or email to bdcoachrose@gmail.com

Same-Day Entries:

A limited number of same-day entries will be accepted with a \$10 surcharge.

Seeding: Heats will be seeded from slowest to fastest by times submitted. (Please do not submit NT. Make a guess.) In individual events, ages will be combined but not sexes.

Awards: Each swimmer will receive a certificate.

Rules: Current USMS Swimming Rules and Regulations will govern the meet.

Warm-up Procedures: No equipment (pull buoys, kick boards, fins, paddles) will be allowed. Swimmers must enter the pool feet first in a cautious and controlled manner. Diving will be permitted only in designated lanes.

Age Groups: 19-24, 25-29, 30-34, etc.

Questions? Email bdcoachrose@gmail.com or call or txt 407-617-2770.

Events: Alternate Women then Men. The relays- any combination of sexes or teams or unattached is OK. Relays will also be organized at the meet.

Please enter a time for each individual event.

- 2 200 Medley Relay (men, women, or some of each, don't have to be on same team)
- 3-4 100 Individual Medley
- 5-6 200 Free
- 7-8 50 Back
- 9-10 50 Breast
- 11-12 100 Fly
- 13-14 50 free
- 15-16. 100 free relay* (mixed as above)
- 17-18 100 free
- 19-20 100 Back
- 21-22 50 fly
- 23-24 100 Breast
- 25-26. 200 IM
- 27-28. 200 free relay*

* Relays are mixed and open age

**Mail entries to
Charlie Rose
762 Live Oak Lane
Oviedo, Fl 3276**

**or email scanned entry and
scanned waiver to:
bdcoachrose@gmail.com**

Include a check for \$30 payable to Blue Dolphins and a copy of your USMS membership card (or be prepared to complete a one-event membership for \$15 at the meet). for email - entry fees can be paid at the meet via check.

Be sure to include the liability statement with your entry form.

Entries are due by August 16th

**Blue Dolphins Masters Meet
ENTRY FORM**

Name _____ Sex ____ Age ____ DOB _____

Address _____ City _____

Team _____ Team Abbreviation _____

USMS # _____ Phone _____ E Mail _____

Enter a time for each of the 4 events you wish to swim. Please do not enter NT. Estimate your time if necessary. All events are in yards.

Women's events on the left, and men's the events on right (relays are mixed)

<i>WOMEN</i>		<i>MEN</i>	
1. _____	200 mixed medley relay	1. _____	
1. _____	100 individual medley	1. _____	100 individual medley
1. _____	200 free	1. _____	200 free
1. _____	50 back	1. _____	50 back
1. _____	50 breast	1. _____	50 breast
1. _____	100 fly	1. _____	100 fly
1. _____	50 free	1. _____	50 free
1. _____	100 free relay	1. _____	100 free relay
1. _____	100 free	1. _____	100 free
1. _____	100 back	1. _____	100 back
1. _____	50 fly	1. _____	50 fly
1. _____	100 breast	1. _____	100 breast
1. _____	200 IM	1. _____	200 IM
1. _____	200 free relay	1. _____	

200 medley relay names if you have them

100 free relay names

200 free relay names

Be sure to complete the Liability Statement on the next page

PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle) M F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed