

SWIA Masters Short Course Fall Meet 2015
Kirn Pool YMCA, Council Bluffs, IA Saturday, October 17th, 2015
Recognition #: pending
Hosted in conjunction with Omaha Masters Fall Meet
Sunday October 18th. Kroc Center Omaha

Schedule: warm-up noon, begin 1 PM.

Entries

- You may enter up to 5 individual events, not including relays.
- Paper entries must be received by Tuesday, October 13th. Deck entries are accepted but new heats will not be added.
- 800 and 1500 MUST pre-register.
- Entry fee \$25 per swimmer. (\$5 discount if entering both meets)
- Meet Coordinator: Melissa Chapman
112 15th Ave
Council Bluffs, IA 51503
Email: mchapman@metroymca.org

USMS Membership: This meet is open to USMS members and non –members. If a USMS member please include a copy of your current registration card with your entry.

This meet will be governed by USMS rules.

Seeding will be slowest to fastest by gender regardless of age.

Pool address: 100 North Ave,
Council Bluffs, IA 51503

Last Lap Party: 1 hour after the end of the last event. TBA

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Recognition #:

Name _____ Phone _____
 Address: _____ Email _____
 Male/Female (please circle) Age as of 10/17 _____ DOB _____
 USMS # _____

Emergency Contact and phone: _____

Please send this signed form and check for \$25 fee to : Melissa Chapman, 112 15th Ave, Council Bluffs, IA 51503. Include a copy of your USMS registration. Please make check payable to Kirn Pool YMCA.

800 Free	
1500 Free	

Events in order:

200 Free Relay		100 Fly	
400 IM		100 Free	
100 Back		200 Fly	
50 Fly		100 Breast	
200 Breast		200 Free	
50 Free		50 Back	
200 Back		100 IM	
200 IM		200 Med Relay	
50 Breast		400 Free	

Please enter seed time or NT for each event you would like to enter.

I , the undersigned, hereby certified that I am physically fit enough to participate in this competition, and have not been otherwise informed by a physician. I acknowledge I am aware of the risks inherent in Master Swimming competition and I agree to assume all risk. As a condition of my participation I agree to hold harmless all of the following: Kirn Pool YMCA, SWIA Maters, Iowa Master USMS and any and all individuals involved with the operation of this meet. In addition I agree to abide by the rules of USMS.

Signed: _____ Date: _____