

7th Annual UVAC Leaf Peepers Masters Meet Saturday, October 24, 2015 Upper Valley Aquatic Center, White River Junction, Vermont

Sanctioned by the New England LMSC for USMS, Inc.

CONTACTS: Meet Director/Entry Chair: Mary Gentry

Additional Contact: Barbara Hummel

UVRaysMasters@gmail.com 802/369-9289 Barbara@goswim.tv

SCHEDULE: Warm-up 9:30 am; meet start 10:30 am. Anticipated end time is before 2:00 pm. Deck entries must be in by 9:45 am. No deck entries will be accepted after this time.

LOCATION: Upper Valley Aquatic Center (UVAC), 100 Arboretum Lane, White River Junction, Vermont 05001 <u>http://www.uvacswim.org</u> Directions may be found later in this document. This is at the intersection of interstates I-89 and I-91 along the New Hampshire and Vermont border. Phone: 802-296-2850. (See below for directions.)

FACILITY: The UVAC competition pool has ten 7-foot-wide, 25-meter lanes, with non-turbulent lane lines, Colorado Timing System electronic touch pads, and an alphanumeric display scoreboard. The minimum depth of the pool is seven feet. A wide gutter is flush with the water to make for easier exit from the pool. Two of the ten lanes will be used as warm-up/warm-down lanes throughout the meet. The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1. Free Wi-Fi is available at the facility.

FAMILY ENTERTAINMENT: There is a separate indoor Splash Park that will be open to the public (and your families!) throughout the meet. The Splash Park has additional lap lanes, a current channel, two-story spiral slide, and zero-entry play structure. UVAC also has a fitness room with assorted equipment. Swimmers and family members must buy a day pass to enjoy the Splash Park and fitness room. Children under 14 must be accompanied by an adult. That adult must also buy a day pass. Bring your family and stay and play after the meet.

ELIGIBILITY: Open to all USMS and MSC-registered swimmers age 18 and older. Your age is your age on December 31, 2015. Include a legible copy of your current 2015 USMS registration card with entry form. On-line USMS membership registration is available at <u>USMS</u> 2015 Member Registration. USMS registration will also be available at the meet. Annual USMS registration via New England Masters drops in price by \$12 after Sept. 1.

CHECK-IN: Positive check-in is required for all swimmers by 10:10 am.

EVENT LIMIT: Swimmers are permitted to enter a MAXIMUM of five (5) individual events. Relays do not count as one of your 5 events.

RELAYS: Real relays will be offered at this meet. Any group of four individuals from the same USMS club (e.g., Adirondack, NEM, etc.) regardless of workout group can organize a relay. This is an opportunity for trying to get records or top-ten times. Age groups for meters relays are based on the total age of the four swimmers. Relays may be deck entered during the meet. There is no additional cost for the relays.

ENTRY TIMES: Enter short-course meters times for all events. An online time converter is available at: <u>http://www.swimmingworldmagazine.com/results/conversions.asp</u>. If you do not enter a seed time, you will be seeded with No Time and placed in the first heat.

SEEDING: All events will be seeded slow to fast regardless of age or gender.

ENTRY FEES: \$25/ person for up to 5 individual events (for entries received by October 21, 2015). Late entries and/or deck entries are \$35. Please make check or money order payable to: UVAC MASTERS.

ENTRY DEADLINE: Entries must be RECEIVED by Wednesday, October 21, 2015 to qualify for the reduced fee. No telephone, fax, or electronic entries will be accepted. Fill in all personal contact information on entry form to enable us to contact you to resolve an entry problem. Include meet entry fee payment, completed entry form, and a copy of your current 2015 USMS card. To print a copy, go to <u>Print USMS Membership Card</u>

RECORD TIMES: Any swimmer who intends to post a National Record or World Record during the meet should bring it to the attention of the Meet Official prior to your event. Times achieved at this competition will be submitted for USMS Top Ten or record consideration.

FOOD: Poolside Cafe will be open in the facility lobby during and after the meet. They offer coffee, juices, sandwiches, fruit, etc. No food is allowed on the pool deck.

AWARDS: No place awards will be given but there may be edible participation awards (yum!)

MAIL ENTRY TO:

Mary Gentry	If entry is mailed using overnight services
193 Stonecrest Ave	please check that a signature is NOT required.
White River Junction, VT 05001	

RULES: Current USMS rules for Masters Swimming will apply. Swimmers will be seeded in heats according to times; heats will run slowest to fastest, regardless of age or sex. No equipment is allowed at any time. No diving during warm-up except in designated lanes.

DIRECTIONS: Visit the website: <u>http://www.uvacswim.org/community/about/hours-and-directions/</u> The Upper Valley Aquatic Center (UVAC) is located at 100 Arboretum Lane in White River Junction, Vermont 05001.

- At the junction of Interstates I-89 and I-91 in Vermont, go north on I-91 and immediately take Exit 11 for White River Junction.
- Turn left off the exit (before the stop light) on to Route 5 South.
- Follow Route 5 immediately under the Interstate
- Travel ¹/₂ mile, go under the other Interstate, and take the next left on to Arboretum Lane.
- UVAC is the only building on Arboretum Lane.

HOTELS: For a list of nearby hotels, visit: <u>http://uvacswim.org/swimming/hotelalliance/</u> Keep in mind that October is foliage season for this area and that non-aquatic leaf peepers will have booked hotels in advance.



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INDIVIDUAL ENTRY FORM

Entries due: October 21, 2015 for the \$25/meet fee. Entries received after that date or deck entered the day of the meet are \$35/meet.

Please print clearly. Include all contact information in case we need to reach you to resolve a discrepancy. Include a legible copy of your current 2015 USMS registration. All events seeded by time slow to fast regardless of age or gender. Enter a maximum of 5 individual events (excluding relays), with short-course meters times.

EVI	ENT	ENTRY TIME	EVI	ENT	ENTRY TIME
#1	200 Meter Butterfly		#12	100 Meter Breaststroke	
#2	100 Meter Freestyle		#13	50 Meter Freestyle	
#3	50 Meter Breaststroke		#14	200 Meter Backstroke	
#4	200 Meter IM		#15	100 Meter IM	
#5	25 Meter Backstroke		#16	25 Meter Fly	
#6	25 Meter Freestyle		#17	25 Meter Breast	
#7	200 Meter Breaststroke		#18	200 Meter Freestyle	
#8	50 Meter Butterfly		#19	100 Meter Butterfly	
#9	100 Meter Backstroke		#20	50 Meter Backstroke	
#10	400 Meter Freestyle		#21	200 Meter Free Relay	sign up at meet
	200 Meter Medley Rela	y sign up at meet	#22	400 Meter IM	

The relays can be entered as women, men, or mixed (2 men and 2 women). All four swimmers must be from the same USMS Club (but not necessarily the same workout group within the Club).

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 of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM AND 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, THE TOWNS OF HARTFORD AND WHITE RIVER JUNCTION, OR ANY INDIVIDUALS OFFICIATING AT THE MEET OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS."

Please sign the USMS Release of Liability form on the next page.

PRINT NAME:						
as your name	appears on your USMS ca	rd				
CITY/STATE/ZIP:		GENDER (circle one): Male / Female				
EMAIL ADDRESS:						
DATE OF BIRTH:	mm/dd/yy	AGE AS OF 12/31/15:				
USMS #	SMS # (please attach legible copy of card)					
LMSC (e.g., NE, AD):	MSC (e.g., NE, AD): WORKOUT GROUP/CLUB (e.g., UV Rays):					
1 1	5 events if submitted by as payable to UVAC M	10/21/15. (\$35/person for late entries or deck entries) asters				
SEND ENTRY FORM, ENT	RY FEE, and COPY (DF USMS/MSC REGISTRATION TO:				
Mary Gentry	7	802/369-9289				
193 Stonecre	est Ave					
White River	Junction, VT 05001	UVRaysMasters@gmail.com				



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			Dat	e Signed