

**2015 PNA & NW Zones SCM Championship Meet**  
**Saturday November 21<sup>st</sup> and Sunday November 22<sup>nd</sup>, 2015**  
 Hosted by Puget Sound Masters  
 Sanctioned by PNA for USMS Inc. #365-S008

**LOCATION:** Weyerhaeuser King County Aquatic Center, 650 SW Campus Drive, Federal Way, WA 98023 206-296-4444

**FACILITY:** 50-meter championship pool set up as two 25m courses, each with 9-ft wide lanes and a water depth range of 9'-10.5'. Continuous warm-up available in 7-lane, 25-yd dive tank. The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1, but as a bulkhead course, is subject to length confirmation. Eligibility of times for USMS Top 10 and Records will be contingent on verification of bulkhead placement.

**TIMES:** Saturday, Nov 21: Warm-up 9:00-9:50am, meet starts 10 am  
 Sunday, Nov 22: Warm-up 9:00-9:50am, meet starts 10 am

**MEET DIRECTOR:** Lisa Dahl, [ldahl@usms.org](mailto:ldahl@usms.org) 206-337-2204

**CONCESSIONS:** Vendor contracted with KCAC, available in lobby.

**RULES:** Current USMS rules will govern the meet. Strictly forbidden:  
 Using hand paddles, fins or kick boards in warm-up areas; Diving in warm-up areas unless in designated sprint lanes.

**ELIGIBILITY:** Open to all 2015 USMS or foreign registered swimmers 18 and above as of 11/22/2015. Age groups based on the swimmer's age as of 12/31/2015. 18-24, 25-29... and up in 5-yr increments

**ENTRIES:** Swimmers may enter up to 6 individual events, 5 individual events/day max. Entries must be **received** by Sunday Nov 15, 2015 11:59 PM (Pacific Time).

**NO ENTRIES ACCEPTED AFTER SUNDAY NOV 15<sup>TH</sup>, 2015 11:59 PM (PACIFIC TIME)**

**SEEDING:** Two courses will be used for the 800 Free, 400 Free, 1500 Free. A single course will be used for all other events. All events slow to fast. Pre-seeding except for asterisked events, below.

**CHECK-IN:** Saturday: 800 Free – 9:30am; 400 IM – 10am; Sunday: 400 Free – 9:30am, 1500 Free – end of Event #39. Swimmers missing the check-in deadline will be scratched from the event.

**RELAYS:** Age groups: 72- 99, 100-119, 120-159, 160-199, 200-239, 240-279, ... (40-year increments as high as necessary). The aggregate age of the four relay team members determines the relay age group. Mixed relays require two men and two women. Relay entries due as follows:

- #11-#14: by the end of event #4,
- #21-#23: by the end of event #12,
- #33-#37: by the end of event #26,
- #44-#46: by the end of event #35

**AWARDS:** Ribbons for individual places 1 – 6. Medals may be purchased at meet. Plaques will be awarded for PNA team awards.

**ORDER OF EVENTS:**

Saturday, November 21		Sunday, November 22	
50m, 100m and 200m events: order is Women, then Men			
Warm Up 9am Meet Start 10am		Warm Up 9am Meet Start 10am	
1	800 Free - Mixed *	24	400 Free - Mixed *
2	400 IM -Mixed *	25/26	200 IM - W/M
3/4	50 Breast - W/M	27/28	100 Back - W/M
5/6	100 Fly - W/M	29/30	50 Free - W/M
7/8	200 Free - W/M	31/32	200 Breast - W/M
9/10	100 IM - W/M		Break 5 minutes
	Break 5 minutes	33/34	W/M 200 Medley Relay
11/12	W/M 200 Free Relay	35	Mixed 400 Free Relay
13	Mixed 800 Free Relay	36/37	W/M 800 Free Relay
14	Mixed 400 Medley	38/39	50 Back - W/M
15/16	100 Breast - W/M	40/41	200 Fly - W/M
17/18	200 Back - W/M	42/43	100 Free - W/M
19/20	50 Fly - W/M		Break 5 minutes
	Break 5 minutes	44/45	W/M 400 Free Relay
21/22	W/M 400 Medley Relay	46	Mixed 200 Medley
23	Mixed 200 Free Relay	47	1500 free - Mixed *

\* Positive Check-In Required

**ENTRY FEES:** \$35.00 (US or Canadian) includes LMSC surcharges. **PLUS** \$3 per individual event (optional for seniors and needs-based swimmers). No charge for relays. Fees include WA state sales tax.



**ONLINE ENTRIES:** Enter online at:

[https://www.clubassistant.com/club/meet\\_information.cfm?c=1534&smid=6393](https://www.clubassistant.com/club/meet_information.cfm?c=1534&smid=6393)

**DIRECTIONS:** From North or South Bound I-5 take exit 142 B. Proceed west on South 348th St for 2 miles. South 348th changes to SW Campus Dr. at 1st Ave. The pool is on the right.

**PAPER ENTRIES:** Complete this form, and waiver on following page for a paper entry.

NAME: \_\_\_\_\_ M F AGE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE \_\_\_\_\_ Email \_\_\_\_\_  
 BIRTHDATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ USMS #: \_\_\_\_\_ - \_\_\_\_\_

**Include a copy of your USMS Registration if not a PNA member**

<b>LMSC:</b> (PNA, Oregon, Inland NW, etc.)	<b>PNA Club:</b> (UC36, BWAQ, PSM, ROCK)
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**PSM Team:**

**ENTRY LIMIT: 6 INDIVIDUAL EVENTS (5 per day) PLUS RELAYS**

Event #	Event Name	Entry Time

**ENTRY FEE: Fees include WA State Sales Tax**

SURCHARGE	\$35.00						
INDIVIDUAL EVENTS	+	\$3 Per Event. No charge for relays. No charge for seniors (65+) or need-basis					
LONG SLEEVED TECH @S25 UNISEX SIZING	+	X-SM	SM	Med	Lg	XL	XXL
TOTAL	\$	Make checks payable to <b>PSM</b> . Mail to: PSM, c/o Lisa Dahl 4742 42 <sup>nd</sup> Avenue S. W. #151 Seattle WA, 98116					

**Questions?** Email Lisa Dahl at [ldahl@usms.org](mailto:ldahl@usms.org) or sarahwelch@comcast.net

**Paper entries** must be **received** by Saturday, Nov 14<sup>th</sup>, 2015. Online entries are due by 11:59pm (PST) Sunday Nov 15<sup>th</sup>, 2015. All swimmers must have a valid 2015 USMS (or foreign) registration prior to meet entry or submit an application accompanying this entry.

**NO ENTRIES ACCEPTED AFTER SUNDAY NOV 15<sup>TH</sup>, 2015 11:59 PM (PACIFIC TIME)**

Signature	Date
_____	_____
<input type="checkbox"/> This is my first Masters meet	

**If using paper entry form, you must complete, sign and mail the USMS Waiver on the following 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