

WEST MICHIGAN MASTERS SWIM ASSOCIATION
SUNDAY, FEBRUARY 28, 2016
 USMS SANCTIONED #196-S003

Location: **Grand Haven High School Pool**
 17001 Ferris St
 Grand Haven, MI 49417

Facilities: The facility is 25-yard, 8-lane pool. Colorado timing system & display, horn start. A continuous warm-up/cool-down area will be provided in the Diving Well. Parking is free. Ample spectator seating. This meet will be swum as Short Course yards (SCY). 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.

Keep all valuables with you or leave at home. Grand Haven Public Schools and Meet Director are not responsible for lost or stolen items.

Meet Director: Ken Danhof-Director *Email:* KJandM@comcast.net or MMethric@gpsbulldogs.org
 Michelle Methric- Asst. Director *US mail to:* Michelle Methric, 61 Diamond Ave, Holland Mi. 49423
Phone: (231) 739-5592 (Ken home)
 (616) 813-8394 (Ken cell)

Schedule: *Session I (Events 1&2)*
 Check-in / Deck Registration 9:15-10:15 a.m.
 Full Pool Warm-up 9:30-10:15 a.m.
 Session 1 Start 10:30 a.m.

Session II (Events 3-16)
 Check-in / Deck Registration 9:15-11:00 a.m.
 Diving Well Warm-up Diving well will be available.
 Session 2 Start 11:30 a.m. (approximate time)

Entry Limit/Fees: Entries emailed/postmarked/received by Friday, February 19 are \$28.
 Entries received after Friday, February 19 (or any Deck Entries) are \$38.
 Entry limit is 5 events plus 1 relay per swimmer.

All entries must be sent to the Asst. Meet Director—Michelle Methric—listed above.

Note: the 200 Medley relay entry must be completed on the day of the meet. A relay cannot be completed using the Entry Form.

Make checks payable to: WMMSA

Eligibility: Only swimmers who have a current USMS membership will be allowed to compete. A Photocopy of your 2016 Membership must accompany your entry. If you're not currently a member, apply now on the web at <http://registration.usms.org/> and show your card/registration number when you arrive.

Seeding: Each event will be seeded by the pre-entered seedtime of each swimmer; with the slower heats first. The meet will be deck seeded according to times submitted, regardless of age and gender. No time (NT) will be seeded in the slower heats

Check-In: Swimmers who have pre-registered must check-in for ALL events.

Results: Results will be posted in the hall, and on the Michigan Masters website at the end of the meet.

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MEET ENTRY FORM

Name: _____ **Date of Birth:** _____ **Sex:** _____

Address: _____ **Email:** _____

City/State: _____ **Zip:** _____

USMS#: _____ **Phone#:** _____

<u>Event #</u>	<u>Seed Time</u>	<u>Event Description</u>
1	_____	1000 Freestyle
2	_____	400 Individual Medley
	Intermission	
3	_____	200 Medley RELAY
4	_____	200 Freestyle
5	_____	200 Individual Medley
6	_____	50 Freestyle
7	_____	100 Backstroke
8	_____	200 Breaststroke
9	_____	50 Butterfly
10	_____	50 Backstroke
	Intermission (fun relay)	
11	_____	100 Individual Medley
12	_____	100 Freestyle
13	_____	100 Breaststroke
14	_____	100 Butterfly
15	_____	200 Backstroke
16	_____	50 Breaststroke

You must also complete the USMS Participant Waiver form on the following page (see page 3) to have your entry be acceptable.

Emergency Contact Person: _____

Emergency Contact Phone #: _____

Signature: _____

Date: _____



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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	

Revised 07/01/2014