**CHATTANOOGA RIVER RATS INVITATIONAL**

**3rd ANNUAL**

**SATURDAY, APRIL 9, 2016**

**SANCTION:** Sanctioned by Southeastern LMSC for USMS Inc.

**HOST CLUB:** McCallie / GPS Aquatics, Chattanooga River Rats and the McCallie School

**LOCATION:** The McCallie School Sports Complex

500 Dodds Ave.

Chattanooga, TN 37404

**MEET REFEREE:** Jim Green

**MEET STARTER:** Larry Alexander

**FACILITIES:** 11 lane 25 yard pool. 8 lanes for competition. The other three lanes will be available throughout the meet for warm-up and warm-down. Non-turbulent lane ropes. Minimum depth 4 feet. Maximum depth 14 feet. Balcony seating for 500. Gymnasium rest areas for swimmers with concession stand and swim shop. The competition course has been certified in accordance with 104.2.2C(4).

**MEET SCHEDULE:** Saturday session warm-up 10:00 Meet begins 11:00 A.M. An estimated time line will be available by noon Friday, April 8, 2016. Meet director reserves the right to combine heats and/or events to expedite the progression of the meet events.

**ELIGIBILITY:** All swimmers must be registered with United States Masters Swimming, Inc. and registration numbers must be listed on the entry form. You must provide a copy of your USMS card.

**RULES:** USMS Swimming Rules will govern the meet.

***Use of audio or visual recording devices, including a cell phone, is not permitted in changing areas, restrooms, or locker rooms. Except where venue facilities require otherwise, changing into or out of swimsuits other than in locker rooms or other designated areas is not appropriate and is prohibited.***

**MEET FORMAT:** All events will be Timed Finals. Age groups are: 18-24, 25-29, 30-34, 35-39 and up in five year increments as high as is necessary (USMS Rule Book, Article 102.3). ***A swimmer’s age on the last day of the meet determines the age group for the entire meet.***

All events will be pre-seeded except for the 500 Freestyle and 400 IM, which will be deck seeded. Positive check-in with the Clerk of Course for all deck-seeded events is required in order to swim.  For the 400 IM, you must check in before 10:45 a.m. For the 500 free, you must check in before the start of the 100 IM.

**Failure to check-in with the Clerk of Course by the deadline will scratch the swimmer.** The positive check-in deadline will be 30 minutes after the start of the session.

**PROCEDURE FOR POSITIVE CHECK-IN OR SCRATCHING:** Only the swimmer or his/her coach may check-in or scratch a swimmer. **If swimming an event**, the swimmer or his/her coach shall circle the name of the swimmer and place their initials next to the swimmer’s name. **If scratching the event**, the swimmer or coach shall strike through the swimmer’s name and place their initials next to the swimmer’s name.

**SCRATCH PENALTIES FOR DECK-SEEDED EVENTS:** Any swimmer failing to swim an event after a positive check-in will result in the swimmer being barred from his/her next individual event – unless excused by the referee.

**RELAY CHECK-IN:** Relay cards will be available at check-in and must be turned in within 30 minutes of the start of the session. Changes may be made until the relay event begins.

**ENTRIES:** A swimmer may swim up to a maximum of ***five individual events.***

Acceptable entries must be legible and complete. Enter Short course yards times or “NT” for no time. Entry forms must include the swimmer’s first and last name, age, USMS registration number and the yard times for each individual event entered. Relay times should be listed for each entered relay. ***All potential relay participants must be entered in the meet by the start of the session the relay is participating.***

**FEES:** $35.00 per swimmer for up to 5 events

$10.00 per relay

**DEADLINE:** All entries must be received by Monday, April 4, 2016. Checks should be payable to the **McCallie School.**

**LATE ENTRIES:** Late entries will be accepted at the discretion of the meet entry chairman. No new heats will be formed after the meet has been seeded.

Email entries and forms to [corcoran@mccallie.org](mailto:corcoran@mccallie.org) or mail to:

McCallie / GPS Aquatics

Care of Stan Corcoran

500 Dodds Ave

Chattanooga, TN 37404

**WAIVER AND RELEASE:** Must be signed by individual before the meet begins.

**SAFETY:**  In the interest of safety, coaches, swimmers and spectators are asked to observe all posted pool rules and conduct themselves in a prudent manner. USMS Safety Guidelines and Warm-up Procedures will be in effect.

**SCORING:** There will be no team scoring for this event.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Event | Female Event # | Entry Time | Male Event # | Entry Time |
| 400 IM | 1 |  | 2 |  |
| 50 Freestyle | 3 |  | 4 |  |
| 200 Back | 5 |  | 6 |  |
| 50 Fly | 7 |  | 8 |  |
| 200 Breast | 9 |  | 10 |  |
| 50 Back | 11 |  | 12 |  |
| 200 Free Relay | 13 |  | 14 |  |
| 200 Fly | 15 |  | 16 |  |
| 50 Breast | 17 |  | 18 |  |
| 500 Free | 19 |  | 20 |  |
| 200 Individual Medley | 21 |  | 22 |  |

http://www.usms.org/logos/USMS_Logo_Horz_tm_200x38.jpg **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 | |

***Revised 07/01/2014***