12th Annual Hall of Fame **Short Course Swim Meet Entry Form** Saturday, April 23, 2016 by Arkansas Masters LMSC for USMS, Inc.

Sanction number

Name		A	Age as of April 23, 2016
Gender	USMS Reg. ‡	#	
Address			
City	State	Zip	Evening Phone
Swim Club			<u> </u>
	28	801 south Un Little Ro	· ·
	\$25 ent	ry Fee	630 deck entry fee
	Arka	nsas Dolphi 1 Hunting Little Rock,	
1. 500 free			EVENIS
2. 100 breast			
3. 50 back	12	100 Bac	<u>k</u>
4. 200 IM	12	. 100 Bu	
5. 100 Free			e Relay
6. 200 Back			e
7. 200 Breast		. 200 IM	
8. 200 Fly		. 1000 F1	ree
9. 50 Breast	18	. 50 Fly_	
informed by a physician. I including possible permane IN THE MASTERS SWIM ALL RIGHTS TO CLAIM THE NEGLIGENCE ACT LOCAL MASTERS SWIM	ant, intending to be legally backnowledge that I am awa ent disability or death, and a MMING PROGRAM OR A IS FOR LOSS OR DAMAC TVE OR PASSIVE OF THE MMING COMMITTEES, T OFFICIATING AT THE N	oound, hereby c re of the risks in agree to assume NY ACTIVITI GES, INCLUDI E FOLLOWIN THE CLUBS, H MEETS OR SU	ertify that I am physically fit and have not been otherwise therent in Masters Swimming (training and competition) all those risks. AS A CONDITION OF MY PARTICIPATION ES INCEDENT THERETO, I HEREBY WAIVE ANY AND NG ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY G: UNITED STATES MASTERS SWIMMING, INC., THE OST FACILITIES, MEET SPONSORS, MEET COMMITTEES, PER VISING SUCH ACTIVITIES. In addition, I agree to abide
Signed			Date