

4th Ithaca Masters Long Course Swim Meet

Saturday August 13, 2016

Sanction #046-S005

Directions: Enter the main entrance of campus off 96B. This is Alumni Circle. Go around Alumni Circle to Grant Egbert Boulevard. Take Grant Egbert Boulevard to the 1st stop sign. Continue straight to the second stop sign at Grant Egbert Boulevard East. Make a left on to Grant Egbert Boulevard East. Follow Grant Egbert Boulevard East to the stop sign. Continue straight. You will then be on Lyceum Drive. As you come up the hill, the A&E Center will be on your right. Go to the south entrance of the building.

Fees: There is a flat meet fee of \$30 per swimmer, which includes up to 5 individual events and relays.

Entries: There will be no deck entries. Online entries are preferred:

https://www.clubassistant.com/club/meet_information.cfm?c=2258&smid=8089

Entry deadline is Wednesday, 8/10/16 midnight

Your credit card will be charged by "Club Assistant.com Events".

OR: submit paper entry on the following page.

Results: will be posted on the Niagara and USMS websites.

Meet Info: The pool will be open for warm up from 8:30 - 9:50 am. Meet will begin at 10 am. Please check in and confirm your events when you arrive. There will be a 10 min break after events 6 (100 Breast), 12 (50 Fly) and 17, (200 Free Relay). There will a positive check-in for the 800 and it will be seeded during the break. The 800 heats will be run fastest to slowest. We will have a lane available for warm-up during the meet except during the 800. The pool is 9 lanes 50 meter, minimum depth 8 foot.

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.

Send entry and payment to:

Kevin Markwardt, A&E Center, 953 Danby Rd, Ithaca NY 14850-7000.

Contact Kevin Markwardt for questions 607-351-7540 or e-mail kmarkwardt@ithaca.edu

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Name: _____ USMS# MSC# _____

Address: _____ City: _____ State: _____

Zip: _____ Sex: _____ Age as of 8/13/16 _____

E-mail _____

Phone # _____

Club: _____

Event #	Event Name	Seed Time	Event #	Event Name	Seed Time
1	200 Med Relay		11	50 Breast	
2	200 Free		12	50 Fly	
3	50 Back		xx	<i>10 Minute Break</i>	
4	200 I.M.		13	100 Free	
5	100 Fly		14	200 Breast	
6	100 Breast		15	100 Back	
xx	<i>10 Minute Break</i>		16	400 I.M.	
7	50 Free		17	200 Free Relay	
8	400 Free		xx	<i>10 Minute Break</i>	
9	200 Fly		18	800 Free	
10	200 Back				

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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

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Revised 07/01/2014