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**Broadside Harbor Open Water Swims**

**1 mile and 2 mile**

June 3, 2017

Boise, Idaho

Sanctioned by Snake River Masters for USMS: Applied For Number

**Meet Registration Form**

**Location:** Broadside Harbor Ski Lakes, 21600 Look Ln, Caldwell ID 83607

**Directions:** From Boise, travel west on l-84. Take exit 26. Turn left (towards Notus/Parma) on Hwy 20/26 and follow for approximately 0.5 mile. Turn left on Look Lane. Follow Look Lane over the railroad tracks and turn left on Broadside Harbor Lane (dirt road). Follow to the lakes. Please park in the dirt lot to the west of the house.

**Races:**

•One-mile swim

•Two-mile swim

**Eligibility:** This event is open ONLY to USMS members or foreign equivalents. A legible photocopy of 2017

USMS card or foreign equivalent MUST accompany entries. One day USMS eligibility is available.

**Rules:** Current USMS rules will govern this event.

Two divisions - Non-wetsuit and Wetsuit

**Start/finish:** Swimmers will start in the water and will finish by going through a chute.

**Water Temperature:** Approximately 70⁰F.

**Course:** The 1-mile race will be an out and back of one lake. The 2-mile swim will be two circuits out and back of the same lake.

**Age Groups:** 18-24, 25-29, 30-34, and so on in 5-year increments.

**Results:** Will be posted online at Sawtoothmasters.org

**Schedule:**

11:00 a.m. Check-in opens

11:45 a.m. Mandatory pre-race meeting

12:00 p.m. Start of 1-mile swim

1:30 p.m. Start of 2-mile swim

**Entry Fees (includes all races) and Deadlines:**

Entries received on or before May 26, 2017: $35

Entries received on or after May 27, 2017: $45

**Lodging:** Hotels on I-84 at Exit 29:

La Quinta, 901 Specht Ave., Caldwell, ID 83605, (208) 454-2222.

Best Western Hotel & Resort, 908 Specht Avenue, Caldwell, ID 83605, (800) 780-7234

**Camping:** There will be primitive camping on-site. Some electrical hookups will be available ($1 0/day). Call Kristi Lee to arrange camping: 208-761-0006. Note: camping is within hearing range of train tracks.

**Parking:** Handicap parking available nearest the house.

**Showers:** There is a fresh water shower on the dock.

**Dogs:** No dogs are allowed on the dock. Dogs must be leashed and owners must clean up after their animals.

**Post-race Potluck Picnic:**  Main dish, paper ware and non-alcoholic beverages will be provided. Please bring a side dish to share. Guests: Adults $5.00; Children free.

**Questions:** Event Director Jill Wright: 208-571-4254 [swimjmw@msn.com](mailto:swimjmw@msn.com).

**On Line Entry at: sawtoothmasters.org**

**Mail Entries to:** Jill Wright

Sawtooth Masters

1626 Williams St.

Boise, ID 83706

**Broadside Harbor Open Water Swims**

**1 mile and 2 mile OW Swim**

**OFFICIAL ENTRY FORM**

June 3, 2017

Sanctioned by Snake River Masters by USMS Inc. Sanction number:

Last Name:\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI: \_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_ ZIP:\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Day Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Eve. Phone: \_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_ (on 6/3/2017) \*\*

D.O.B: \_\_\_\_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_ Club Name or Unattached:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

USMS #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Print name as it appears on USMS registration card.

\*\*18-year-olds must be 18 on 6/3/2017

**Entry Fees and Deadlines**

Circle all events you wish to swim:

One-Mile Swim Two-Mile Swim

|  |  |  |  |
| --- | --- | --- | --- |
|  | **FEE** |  | **TOTAL** |
| 1st Registration Period Opens April 1, 2017  1st Registration Period Closes May 26, 2017 | $35 |  |  |
| 2nd Registration Period Opens May 27, 2017  2nd Registration Period Closes June 1, 2017 | $45 |  |  |
| Race Day Registration June 3, 2017 | $45 |  |  |
| One Day USMS Registration | $15 |  |  |
| \*Guest Picnic Tickets – Adult | $ 5 | # of guests |  |
| **TOTAL AMOUNT DUE** |  | | $ |

\*Picnic for children age 12 and under is free.

**Make Check or money order payable to: Sawtooth Masters**

**MAIL ENTRIES TO:** Jill Wright, **Sawtooth Masters**, 1626 Williams St., Boise, ID 83706

**Be sure to sign and include the liability waiver below:**

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 03/27/2017***