

WILLIAM J. HOLMES SPORTS CENTER POOL in BOSTON, MA on OCTOBER 14, 2017

MEET DAY:

- Saturday, October 14, 2017 at 9:30am
- The pool will be open for warm-up at 8:30am.
- warm-up/cool-down area available during meet
- Check-in & Registration will begin at 8:30am and close at 9:00am. **Pre-registration is preferred!*

LOCATION:

• The William J. Holmes Sports Center Pool at Simmons College (331 Brookline Ave. Boston, MA)

TIMING:

• Electronic timing/touch-pads will be provided with back-up timers for each lane. If you believe you are within reach of a USMS or FINA Masters record, please notify the scorers table prior to the event. Please note: *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.*

USMS SANCTION #: 027-S006

ORDER OF EVENTS:

- 200 Meter Medley Relay
- 400 Meter Freestyle
- 50 Meter Butterfly
- 50 Meter Backstroke
- 50 Meter Breaststroke
- 50 Meter Freestyle
- 100 Meter IM
- 200 Meter Freestyle
- 100 Meter Butterfly
- 100 Meter Backstroke
- 100 Meter Breaststroke
- 100 Meter Freestyle
- 200 Meter IM
- 200 Meter Freestyle Relay

ENTRY FEE:

- Pre-registration: \$12.00 Entry Fee + \$3.00/event. No charge for relays. Limit 5 individual entries per person. Check or Cash only. (Checks made out to: *Simmons College*)
- Meet day deck-entry fee: \$17.00 Entry Fee + \$3.00/event. No charge for relays.
- This meet is non-scoring, but all times will be official and count towards SCM top-10 and all USMS and NEM records.

MEET DIRECTOR:

• Mindy Williams [mindy.williams@simmons.edu] Phone: (617) 521-1032; Fax: (617) 521-1026 athletics.simmons.edu

HOSTED BY:

• Simmons College Swimming & Diving (a.k.a. The Sharks!)

<u>DIRECTIONS</u>: GPS – 331 Brookline Ave, Boston

From the WEST:

Follow the Mass Pike (I-90) East to Exit #18 (left exit towards "Cambridge/Somerville"). Merge onto Cambridge St (which becomes River St). Turn Right onto Memorial Drive (Rt.2). Take the Rt 2 East ramp towards "Brookline/Kenmore Square". At the roundabout, take first exit onto Rt 2 East. After ½ mile, turn right onto Park Dr (Rt.2). Follow for 0.2 miles. Take a slight right onto the Riverway. Turn Right onto Brookline Ave. Holmes Sports Center is #331, directly across from Beth Israel Hospital.

From the SOUTH:

• Take I-93 North to Exit 26 (Storrow Drive). Keep left on exit ramp and follow signs for "Storrow Drive West." Follow Storrow Drive for approximately 1.6 miles. Turn slight left onto ramp towards "Kenmore/Fenway/US-1 South." Stay to the left toward "Fenway/US-1 South." Take the Boylston St/Outbound ramp toward Riverway. Stay Straight onto Boylston St. Continue straight through stop light onto Brookline Ave. Holmes Sports Center is #331, directly across from Beth Israel Hospital.

From the NORTH:

• Take I-93 South to Exit 26 (Storrow Drive West/North Station).Keep left on exit ramp and follow signs for "Storrow Drive West." Follow Storrow Drive for approximately 1.6 miles. Turn slight left onto ramp towards "Kenmore/Fenway/US-1 South." Stay to the left toward "Fenway/US-1 South." Take the Boylston St/Outbound ramp toward Riverway. Stay Straight onto Boylston St. Continue straight through stop light onto Brookline Ave. Holmes Sports Center is #331, directly across from Beth Israel Hospital.

MEET REQUIREMENTS:

- All participants must be registered with USMS. There will be a USMS registration table available for those that have not yet obtained their membership for 2017.
- Entries can be mailed prior to the meet (preferred) but deck entry is also available between 8:30 and 9:00am on meet day (for an additional \$5 fee).
- All participants must sign a liability waiver before competition begins.

PARKING:

• A limited number of parking spots are available on the Riverway and along Boylston Street. For a daily fee of \$7.00, parking is available at the MASCO garage located at **375 Longwood Ave** (less than a 5-minute walk to the Simmons pool).

OCTOBER SWIM FEST

ENTRY FORM

- William J. Holmes Sports Center Pool at Simmons College, 331 Brookline Ave, Boston, MA
- Facility is an 8 Lane, 25-Meter course with additional space for warm-up/cool-down.
- Date: October 14, 2017. [Registration and Warm-up begin at 8:30am, Meet begins at 9:30am]
- Sanctioned by NE-LMSC for USMS, Inc Sanction # 027-S006

Name:		Age on 12/31/17:	Date of Birth:		
Address:					
Street City Phone Number:		State	Zip		
		Emergency Contact Phone:			
USMS Club Team:	USMS Regis	tration #	Gender: <u>M</u> / F		
EVENTS	ENTRIES	SEED TIMES (SCM)			
200 Meter Medley Relay	-	<u>Deck Entry (No Fee)</u> – Rela	y Forms due @ 9:00am		
400 Meter Freestyle					
50 Meter Butterfly					
50 Meter Backstroke					
50 Meter Breaststroke					
50 Meter Freestyle					
100 Meter IM					
200 Meter Freestyle					
100 Meter Butterfly					
100 Meter Backstroke					
100 Meter Breaststroke					
100 Meter Freestyle					
200 Meter IM					
200 Meter Freestyle Relay	-	<u>Deck Entry (No Fee)</u> Relay Forms due prior to 10	00 Freestyle		

(Pre-registration) Entry Fees = \$12 per person + \$3 per event: $12.00 \text{ Entry Fee} + (\underline{x 3.00}) = \underline{x 3.00} = \underline{x 3.00}$ Additional \$5 entry fee for on-site registration # of Events Total Due

- Please make checks payable to: *Simmons College*
- Mail Entry Form, Waiver, Copy of USMS Membership Card & Payment to:

Simmons College Dept. of Athletics Attn: Mindy Williams 300 The Fenway Boston, MA 02115

For Administration U	se Only:			
Waiver Signed []	USMS # Confirmed []	USMS # Pending []	Entries Paid []	Events Entered []

OCTOBER SWIM FEST

LIABILITY RELEASE



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 (cii M	rcle) F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip	I			1	
Signature of Participant				Date	e Signed