

2002 United States Masters Swimming 2 Mile Open Water Championship

1 Mile Open Water Race

Saturday, July 27, 2002

Edgewater State Park, Cleveland, Ohio

SANCTIONED BY: Lake Erie LMSC for USMS Inc. Sanction # 18-072702-OWS

EVENTS

One and two mile open water swims on a 1/2 mile course in Lake Erie. Only the two mile is USMS National Championship.

SCHEDULE

Registration/Check-in	6:45 am - 7:45 am
Pre-race Instructions	7:45 am
2 Mile Race Start	8:00 am
1 Mile Race Start	8:15 am

Awards Ceremony and Social following the completion of both races. There is no additional charge for the social.

LOCATION

Edgewater State Park, located approximately 2 miles west of downtown Cleveland off Route 2, the Memorial Shoreway.

ELIGIBILITY

USMS registration is required of all participants. A photocopy of the swimmer's current registration must be submitted with the official entry form. A One Day USMS Registration is available for an additional fee of \$10.00 and must be submitted at the time of entry.

ENTRY FEES

- Received by June 27, 2002: \$25.00 per individual entrant.
- Entries received after June 27th but by the deadline on July 21, 2002: \$35.00.
- All early entries receive a t-shirt.
- Sorry, fees are nonrefundable.
- THERE WILL BE NO RACE DAY ENTRIES!***

RULES

Current USMS rules will govern this event. **NO WET SUITS WILL BE ALLOWED IN THE TWO MILE CHAMPIONSHIP RACE.** Swimmers choosing to wear a wet suit in the One Mile Race will not be eligible for awards or official placing in the results

DEADLINE

Entries and donations must be received by the Race Director Doug Brogan by Saturday, July 21, 2002. **THERE WILL BE NO RACE DAY ENTRIES.**

SAFETY

All swimmers must wear the cap provided at check-in and their race number on their arm. Lifeguards, kayaks and water safety boats will monitor the race course. Anticipated water temperature will be between 72-76 degrees. A 90 minute time limit will be in effect for these races. No wet suits in the Two Mile race.

AWARDS

USMS National Championship medals will be awarded to the first six places of each group for the Championship Two Mile event. First place finishers will also receive a National Championship patch. Separate awards will be given to the first three places of each age group for the One Mile event as well. Swimmers choosing to wear a wet suit in the one mile race will not be eligible for awards of official placing in the results due to the competitive advantage wet suits provide. Age groups will be 19-24, 25-29, 30-34 . . . (5 year increments as high as necessary).

FOR MORE INFORMATION

Contact Race Director Doug Brogan at (440) 835-0142 or via e-mail at: Fittogether@aol.com. Please no phone calls after 9:00 pm.

CHARITY FUND RAISER

Proceeds from this event support the Arthritis Foundation and donation forms are available upon request from the race directors. Any monies collected and submitted will count toward your entry fee. Pledges exceeding \$100 will earn a sweatshirt with the event logo. Pledges exceeding \$200 will also earn an event towel.

SHIRTS

T-shirts will be given to each entrant as a benefit of entry. Shirts will be available in M, L, XL, and XXL. Additional shirts will be sold for \$20 on race day as supplies last.

MAIL COMPLETED ENTRY FORM

BY 7/21 TO:

DOUG BROGAN

398 ELMWOOD ROAD

BAY VILLAGE, OHIO

44140-2417

**13th ANNUAL O*H*I*O MASTERS SWIM CLUB
1 AND 2 MILE OPEN WATER SWIMS
To Benefit the ARTHRITIS FOUNDATION**

NAME _____ USMS# _____
 ADDRESS _____ CLUB NAME: _____
 CITY _____ STATE _____ ZIP _____ CLUB ABBR: _____
 DATE OF BIRTH _____ AGE _____ SEX _____ (MALE) _____ (FEMALE)
 PHONE (home): _____ e-mail _____
 Emergency Contact: _____ Phone: _____

USMS RELEASE: "I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters Swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS. Finally, I specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks."

SIGNATURE _____ DATE _____

**YOUR ENTRY MUST INCLUDE YOUR USMS CARD OR PROOF OF MEMBERSHIP
IN ANOTHER RECOGNIZED MASTERS SWIMMING ORGANIZATION.**

**ENTRY FEES: (MAKE CHECKS PAYABLE
TO OHIO MASTERS SWIM CLUB)**

_____ \$25 (if received by June 27)
 _____ \$35 (after June 27)
 _____ M _____ L or _____ XL (T-Shirt size)
 _____ \$10 one day USMS registration
 _____ \$ TOTAL ENCLOSED WITH ENTRY
 _____ 2 MILE USMS CHAMPIONSHIP OR
 _____ 1 MILE RACE

MAIL TO:

**DOUG BROGAN
398 ELMWOOD ROAD
BAY VILLAGE, OHIO 44140-2417
(440) 835-0142
fittogether@aol.com**

Motel information is available at the Convention and Visitors Bureau of Greater Cleveland website: www.travelcleveland.com

YOUR COMPLETED ENTRY FORM AND FEES MUST BE RECEIVED BY JULY 21, 2002

First Class Mail

O*H*I*O Masters Swim Club
398 Elmwood Road
Bay Village, Ohio
44140-2417

**2 Mile USMS Open Water Championship
and 1 Mile Open Water Race**

**EDGEWATER STATE PARK
CLEVELAND, OHIO
SATURDAY, JULY 27, 2002
8:00 A.M.**

TO BENEFIT THE ARTHRITIS FOUNDATION

- ADDITIONAL ENTRY INFORMATION AND FORMS MAY BE DOWNLOADED FROM: WWW.MINDSPRING.COM/~LAKEERIEMASTERS
- NO RACE DAY ENTRIES ACCEPTED



Take Control. We Can Help.™

The mission of the Arthritis Foundation is to support research to find the cure for and prevention of arthritis and to improve the quality of life for those affected by arthritis.

O*H*I*O MASTERS SWIM CLUB
 Lake Erie Open Water Swim
 July 27, 2002
 DONATION SHEET

Name _____ Phone (h) _____ e-mail _____

Address _____ City _____ State _____ Zip _____

DONOR'S NAME	AMOUNT	DONOR'S NAME	AMOUNT
TOTAL			

PROCEEDS BENEFIT THE ARTHRITIS FOUNDATION

- Return this form with your paid donations and entry by 7-21-2002
- Additional donations may be turned in on 7-27-2002 to qualify for fund-raising awards
- The top three fund-raisers will receive special prizes
- Raise \$100.00 and receive a race sweatshirt
- Raise \$200.00 and receive the sweatshirt and an event towel

Please make checks payable to the: **ARTHRITIS FOUNDATION**