



2008 United States Masters Swimming Long Distance 5K & 10K Postal National Championships

Sponsored by Central Oregon Masters Aquatics
Sanction 378-PO1

DATE: Swims must be completed on or between May 15 and September 15, 2008. **All entries must be received by September 25, 2008.**

OBJECTIVE: To swim 5K (5000 meters) or 10K (10,000 meters). The recorded time determines the order of finish. If two or more swimmers report the same time, a tie will be declared.

LOCATION: Any 50-meter pool. The 5K equals 100 lengths and the 10K equals 200 lengths.

ELIGIBILITY: Each participant must be registered for 2008 with USMS (or the equivalent organization for non-U.S. Swimmers). Foreign swimmers are not eligible for USMS records or All-American selection. **A copy of your current 2008 registration card must accompany your entry.**

INDIVIDUAL EVENTS: Men and women compete separately in age groups of five-year increments: 18-24, 25-29, 30-34,...100+. The swimmer's age on the day he or she actually completes his/her swim will determine his or her age group. Swimmers who change age groups during the event may enter twice, but must swim the event twice, one time in each age group.

RELAY EVENTS: Relay events will be contested in three categories: 3 men, 3 women, or 4 mixed (2 men, 2 women). Each relay member **MUST** also enter the individual event and be registered with the same Club. Unattached swimmers are not permitted on relays. The youngest relay member's age shall determine the relay's age group. Age groups are 18+, 25+, 35+, . . . 95+. The cumulative time for the individual swims will be the relay time.

CLUB EVENT: Each Club will be entered automatically in the Club event. Club point scoring will be calculated based on Quality Points, which are ratios of each individual time to the corresponding USMS Record for the gender & age group. The faster the swim the more Quality Points a swimmer earns. Club totals will be the sum of the Quality Points of its swimmers. Since every swimmer will receive Quality Points, every swimmer counts!

FEES: \$12.00 for each individual entry (\$15.00 for non-US swimmers) and \$18.00 for all relay entries. Fees are non-refundable and are payable by check or money order only – no cash. Foreign entrants must submit fees in U.S. Funds via international money order or bank check drawn on a bank with a U.S. affiliate.

AWARDS: The top 6 finishers in each age group in the individual event and the top 3 clubs in relay events will receive USMS Long Distance National Championship medals. First place finishers in each individual and relay age group will also receive a USMS championship patch. Only one patch per event/participant will be awarded.

RULES: 2008 USMS Rules govern these events. Drafting, flotation, and propulsive devices (pull buoys, fins, paddles, wet suits, etc.) are not permitted. No more than two swimmers may share a lane, with each swimming on one side of the lane during the entire race (i.e. no circle swimming). An adult acting as a starter/head timer/referee shall be present at all times during the swim. Each swimmer must have a verifier to count laps, record cumulative splits, and time the event with a stop watch or electronic timing device. Cumulative split times must be recorded to the nearest second and tenth (or hundredth) of a second. A split sheet must be kept for each swimmer and a copy included with the entry form, signed by the verifier. One person may serve as a counter for no more than two swimmers per heat. No adjustment may be made for swims completed at altitude. An alternative split sheet with room for both 100-split times and cumulative split times is posted at:
http://www.usms.org/longdist/5k_10k_splits.pdf

T-SHIRTS: High-quality custom short-sleeved t-shirts will be available in both women's and men's styles for \$16 (\$20 for outside USA).

RESULTS: Complete results will be available by mail, e-mail or via the internet (see the USMS web site after October 25, 2008)

QUESTIONS: Contact event director Bob Bruce
E-mail (preferred): coachbob@bendbroadband.com
Phone (before 2100 hrs PDST): 541-317-4851

Staple a copy of your USMS (or equivalent) Registration Card here.

2008 USMS 5K/10K POSTAL SWIM NATIONAL CHAMPIONSHIPS INDIVIDUAL ENTRY FORM

NAME: _____ GENDER: M or W AGE: _____ BIRTHDATE: ____/____/____
Name as it appears on Registration Card - Last, First Circle one Day of swim MM DD YY

ADDRESS: _____ PHONE: _____ - _____ - _____

CITY: _____ STATE: _____ ZIP: _____ COUNTRY: _____

CLUB: _____ CLUB ABBR: _____ REGISTRATION NUMBER: _____ - _____
2008 USMS or FINA

E-Mail Address: _____ SEND RESULTS (Check **ONE**): E-Mail (preferred) **OR** Mailed Copy

Check which USMS Postal Events you have entered this year: 1 Hour _____ 5K _____ 10K _____

Check if you want to decline any awards you may earn: Medals _____ Patches _____ Results posted at: www.usms.org by October 25, 2008

USMS LIABILITY RELEASE: I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not otherwise been 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.

SWIMMER'S SIGNATURE _____ **DATE** _____

In addition, I certify that I have read the rules of this competition and that on ____/____, 2008, I swam ____5K ____10K in a time of: ____:____:____ at:

Pool name/City _____

SWIMMER'S SIGNATURE _____

Verifier's/Timer's Name, PRINTED _____

Verifier's Phone Number or Email Address _____

Entry Fee: US\$12, USMS, or
 US\$15, other FINA Master = US \$ _____

T-Shirts: Indicate Quantity Ordered

Size: Small____ Medium____ Large____ X-Large____ XX-Large____

Style: Women's____ Men's____

Cost: US\$16 each in USA or US\$20 each outside USA = US \$ _____

TOTAL = US \$ _____

Include: Copy of 2008 **USMS or FINA REGISTRATION CARD**, Entry form and split sheet

Check Payable to: COMA

Send to: Bob Bruce
61200 Parrell Rd.
Bend, OR 97702

Must be RECEIVED by September 25, 2008.

Record Split Entries using CUMULATIVE TIMES to the nearest second & tenth (or hundredth).

100		2100		4100		6100		8100	
200		2200		4200		6200		8200	
300		2300		4300		6300		8300	
400		2400		4400		6400		8400	
500		2500		4500		6500		8500	
600		2600		4600		6600		8600	
700		2700		4700		6700		8700	
800		2800		4800		6800		8800	
900		2900		4900		6900		8900	
1000		3000		5000		7000		9000	
1100		3100		5100		7100		9100	
1200		3200		5200		7200		9200	
1300		3300		5300		7300		9300	
1400		3400		5400		7400		9400	
1500		3500		5500		7500		9500	
1600		3600		5600		7600		9600	
1700		3700		5700		7700		9700	
1800		3800		5800		7800		9800	
1900		3900		5900		7900		9900	
2000		4000		6000		8000		10000	

2008 USMS POSTAL 5K & 10K NATIONAL CHAMPIONSHIPS

RELAY ENTRY FORMS

Circle Relay Event: 5K 10K

Circle Relay Type: Women (3) Men (3) Mixed (2 Women & 2 Men) Relay Age Group : _____

USMS Club Name: _____ USMS Club Abbr: _____

Contact Person: _____ Phone # or e-mail _____

Swimmer (Name, USMS # and Date of Birth as it appears on USMS Registration Card)	Gender circle one W or M	Age	Time
#1 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#2 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#3 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#4 _____ USMS # _____ DOB _____	_____	_____	____:____:____
Total Relay Time :			____:____:____

Circle Relay Event: 5K 10K

Circle Relay Type: Women (3) Men (3) Mixed (2 Women & 2 Men) Relay Age Group : _____

USMS Club Name: _____ USMS Club Abbr: _____

Contact Person: _____ Phone # or e-mail _____

Swimmer (Name, USMS # and Date of Birth as it appears on USMS Registration Card)	Gender circle one W or M	Age	Time
#1 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#2 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#3 _____ USMS # _____ DOB _____	_____	_____	____:____:____
#4 _____ USMS # _____ DOB _____	_____	_____	____:____:____
Total Relay Time :			____:____:____

Relay Entry Fees \$18.00 per relay.

Payable in U.S. \$ Check or International Money Order ONLY to COMA.

Mail to: Bob Bruce, 61200 Parrell Rd. Bend, OR 97702