



Farmington Valley YMCA Masters Swim Classic To Benefit the YMCA Strong Kids Campaign

Sunday, March 11th, 2012 – Farmington Valley YMCA, 97 Salmon Brook St, Granby Ct 06035

Sunday March 11, 2012, 7:00am Warm Up / 8:00am Start

Print seed times clearly! Use a colon between minutes and seconds.

Circle the event number you wish to enter and if you have one, enter a seed time (select up to 5 individual events, see relay note below for relay entries). Seedings will be from slow to fast; Entries with no seed times will be placed in the slowest heat. Heats will be separated by age group. Heat sheets will be posted 15 minutes prior to the start of the meet. Separate results and scoring for men and women by age group will be posted after each event.

Event No.	Entry Time Women	Event	Entry Time Men	Event No.
1	Deck Seeded	200 Medley Relay	Deck Seeded	2
3		200 Free		4
5		50 Backstroke		6
7		100 Butterfly		8
9		100 Individual Medley		10
11		50 Free		12
13		100 Backstroke		14
15		50 Breaststroke		16
17		50 Butterfly		18
19		100 Free		20
21		200 Individual Medley		22
23		100 Breaststroke		24
25	Deck Seeded	200 Free Relay	Deck Seeded	26

Participant Information

Name _____

Address _____

E-Mail _____

Home Phone _____ USMS# _____

Age _____ DOB _____ Gender **M** **F**

Emergency Contact (name/phone) _____

Greater Hartford YMCA member Other YMCA (name _____)

Non-Master Swimmer

Other Masters Club (please indicate club _____)

Meet Details

All Farmington Valley YMCA meets will be governed by the current USMS rules. All properly timed personal performances by registered Masters swimmers at an official meet are eligible for record consideration in Connecticut, New England, and Nationally.

Membership to Master swimming isn't required but is encouraged.

Results will be posted in the following age groupings: **18 to 29; 30 to 49; 50 & up**

Directions: Located on Route 10 in Granby, 1.5 miles south from intersection with Route 20.

Facility: 8-lane pool, additional pool for warm-ups/ cool down and electronic timing will be used.

Meet Directors: Jocelyn Mitchell and Charlie Austin

Fees: Entries received by Sunday, March 4th will be pre-seeded and cost \$5.50 for individual events/\$22 for relays. Late entries, including deck entries, will be accepted until 7:30am 3/11/12 at a cost of \$7 per event/\$28 for relays. Make checks payable to Farmington Valley YMCA. All proceeds benefit FVYMCA Strong Kids Campaign.

Send Entries To: FVYMCA, 97 Salmon Brook St, Granby Ct 06035,
Attn: Charlie Austin, Aquatics Director

of Events _____ Amount Enclosed _____

Waiver (must be signed by all participants)

"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 AND ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES INCLUDING THOSE 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"

ACKNOWLEDGE OF RISK AND WAIVER OF LIABILITY

To: YMCA of Metropolitan Hartford, Inc., its branches, officers, directors, trustees, managers, employees, volunteer staff, and agents (collectively and individually hereinafter referred to as the "Y"). The undersigned on behalf of himself/herself and his/her minor children named below (hereinafter collectively referred to as the "Releasers") acknowledges that Releasers may participate in activities involving risk of injury to person or property and that they assume full responsibility for all such risk. Other than as set forth below, the undersigned certifies that each of the Releasers is in good health with no condition, illness, or abnormality which might subject them to undue personal risk from engaging in such activities. In the event of an emergency requiring medical care, the Y is authorized to use its best efforts to obtain whatever medical treatment it deems necessary or appropriate under the circumstance. Furthermore, the undersigned on behalf of the Releasers hereby specifically releases, waives, discharges and covenants not to sue the Y with respect to any or all liability to the releasers, their heirs, personal representatives, and assigns for any loss or damage, and any claim or demand thereof, on account of injury to person or property, including death, whether caused by the negligence of the Y or otherwise, while Releasers are in, on or about any premises of the Y or using any of the Y's facilities or equipment or participating in any program affiliated with the Y, without regard to location. The undersigned expressly agrees that the foregoing waiver of liability is intended to be as broad and inclusive as is permitted by the law of the State of Connecticut and that any portion thereof is held invalid, the undersigned agrees that the balance shall, notwithstanding, continue in full force and effect.

The undersigned understands that the Y had the right to dismiss any person whose actions or attitude are deemed detrimental to the Y and/or other participants, with all fees forfeited. The undersigned gives permission for photos or videotapes of himself/herself and his/her minor children while participating in Y activities to be used for promotional purposes. (Cross out and initial if permission NOT given)

THE UNDERSIGNED HAD READ AND VOLUNTARILY SIGNS THIS ACKNOWLEDGMENT OF RISK AND WAIVER OF LIABILITY, AND FURTHER AGREES THAT NO REPRESENTATIONS OR STATEMENTS OTHER THAN THOSE SET FORTH HEREIN HAVE BEEN MADE.

Signature of the Participant _____ Date _____