

OREGON MASTERS SWIMMING SHORT COURSE METERS ASSOCIATION CHAMPIONSHIPS

Sanctioned by Oregon Masters Swimming, Inc. for USMS, Inc. • Sanction #372-04

Eligibility: Currently registered USMS swimmers, 18 years and older. Unregistered swimmers must submit a 2012 registration form and fee with this form.

Hosted by: Columbia Gorge Masters
Hood River Aquatic Center
1601 May Street
Hood River, Oregon
7 lanes competition-electronic timing
2-3 lane separate warm-up/down area

DATE: Fri., Sat. & Sun. April 13-15, 2012

FRIDAY: WARM-UPS: 3PM • MEET STARTS: 4PM
SATURDAY: WARM-UPS: 8AM • MEET STARTS: 9AM
SUNDAY: WARM-UPS: 8AM • MEET STARTS: 9AM

Meet director: Sandi Rousseau, 503-806-7020, swim@gorge.net

Directions to the pool: Eastbound: Take I-84 to Exit#62 (first Hood River Exit), turn right onto Cascade and go toward town for 1.2 miles to the first stoplight. Turn right on 13th, go up the hill and turn right on May St (just past the hospital on the left). Pool will be on your left just past the park. Westbound: Take I-84 to Exit #63 (second Hood River Exit), turn left and go into town. Go through the blinking red light and go one block to State Street. Turn right and go .6 mile to 13th Street. Turn left, proceed up the hill and turn right on May Street (just past hospital). Pool will be on your left just past the park.

ALL ENTRANTS MUST SUBMIT A PHOTOCOPY OF THEIR CURRENT USMS REGISTRATION CARD WITH THIS ENTRY.

HOST (HOUSE OUR SWIMMERS TONIGHT): CONTACT SANDI ROUSSEAU 541-354-2580 OR E-MAIL SWIM@GORGE.NET

ENTRY DEADLINE: POSTMARK NO LATER THAN FRIDAY MARCH 30, 2012

NAME _____

BIRTHDATE _____ AGE _____ SEX _____

ADDRESS _____

2012 USMS # _____

CITY _____

IF OMS, LOCAL TEAM (SEE LISTINGS ON GUIDELINES PAGE) _____

STATE _____ ZIP _____

USMS CLUB (OREG, SWMS DUCK, ETC) _____

PHONE _____

E-MAIL _____

AGE GROUPS: 18-24, 25-29, 30-34, ETC. UP TO 100+. RELAY AGE GROUPS: 72-99, 100-119, 120-159, 160-199, 200-239, 240-279, 280-319 AND 320-359. **YOU MAY ENTER A MAXIMUM OF 6 INDIVIDUAL EVENTS PLUS UNLIMITED RELAYS WITH NO MORE THAN 5 INDIVIDUAL EVENTS PER DAY.** ENTER RELAYS AT THE MEET. ONLY 200 METER RELAYS WILL BE COUNTED FOR TEAM POINTS. THE 400 AND 800 DISTANCES OF RELAYS WILL ONLY BE OFFERED AS TIME PERMITS, AS DETERMINED BY THE MEET DIRECTOR. YOU MAY SWIM THE 200, 400 & 800 METER DISTANCE OF EACH RELAY ONLY ONCE. THE 400IM, 400, 800 & 1500 FREESTYLES WILL BE DECK SEEDED. SEE GUIDELINES PAGE POSTED ON-LINE OR IN THE AQUAMASTER FOR TIMES REGARDING CHECK-IN DEADLINES FOR THESE EVENTS AND FOR RELAYS. ALL EVENTS WILL BE SEEDED SLOW TO FAST. SEE GUIDELINES PAGE ON-LINE OR IN THE AQUAMASTER FOR MORE INFORMATION. YOUR TEAM MUST BE REGISTERED FOR 2012 IN ORDER TO SCORE POINTS.

Friday, April 13, 2012

400 IM (1) _____ : _____ . _____

1500 FREE (2) _____ : _____ . _____

Saturday, April 14, 2012

100 IM (3) _____ : _____ . _____

50 BREAST (4) _____ : _____ . _____

200 FREE (5) _____ : _____ . _____

100 FLY (6) _____ : _____ . _____

* break*

FREE RELAYS (7-12)

100 BACK (13) _____ : _____ . _____

200 BREAST (14) _____ : _____ . _____

50 FREE (15) _____ : _____ . _____

* break*

MIXED MEDLEY RELAYS (16-17)

800 FREE (18) _____ : _____ . _____

**ASSOCIATION AWARDS BANQUET - 6PM, HOOD RIVER HOTEL,
SPEAKER: DR. CHRIS VAN TILLBURG, FROM THE CRAG RATS -
'ANATOMY OF A SEARCH'**

Sunday, April 15, 2012

400 FREE (19) _____ : _____ . _____

Break- 20 minute warm-up, event 20 will not start before 10 am

50 FLY (20) _____ : _____ . _____

200 BACK (21) _____ : _____ . _____

100 BREAST (22) _____ : _____ . _____

* break*

MEDLEY RELAYS (23-26)

100 FREE (27) _____ : _____ . _____

200 FLY (28) _____ : _____ . _____

50 BACK (29) _____ : _____ . _____

200 IM (30) _____ : _____ . _____

* break*

MIXED FREE RELAYS (31-33)

Please plan
to attend the OMS Annual Meeting on Saturday at
5pm - - and be a part of this great organization!

"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 & 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, HOSTS 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."

SIGNATURE _____ DATE _____

Assoc. Awards Banquet • Saturday Evening \$20.00 (all ages) _____ each @ \$20.00

AWARDS BANQUET _____

MEET ENTRY FEE **28.00**

TOTAL ENCLOSED _____

**MAKE CHECKS PAYABLE TO OREGON MASTERS SWIMMING.
SEND FORM(S) AND FEE(S) TO: OMS DATA MANAGER, PO BOX 1072, CAMAS, WA 98607-1072**