



LAKE JUNIPER OPEN WATER SWIM
Open Water Clinic & 1200-meter Pool Open Water Swim
Bend, Oregon - May 12-13, 2012

Hosted by Central Oregon Masters Aquatics
 Sanctioned by U.S. Masters Swimming #372-W002-3



WONDERFUL WATER WEEKEND THREE-PAK:

This swim weekend is comprised of three unique events at the same site. Triple your fun by participating in all three!

- A basic open water clinic on Saturday morning;
- A long-course pool meet on Saturday afternoon (see the event website for separate information & entry form);
- A pool open water swim on Sunday morning with a special brunch following the swim.

GENERAL INFORMATION

SITE: Juniper Swim & Fitness Center, 800 NE 6th St., Bend, OR. All events will be held in the JSFC covered 50-meter pool (also known as 'Lake Juniper' for this event). Expected water temperature is 80-81 degrees F.

ELIGIBILITY: Open ONLY to current USMS member swimmers, who must be adults aged 18+ on Saturday, May 12, 2012. A legible photocopy of your 2012 USMS membership card (or foreign equivalent) MUST accompany mailed entries. USMS "One-Event membership—covering both clinic & swim—is available for adults 18+ only for \$18.

REGISTRATION: Register using the attached entry form OR save time, paper, & errors by registering online at: https://www.ClubAssistant.com/club/meet_information.cfm?c=1756&smid=3779

ENTRY DEADLINE: MAILED by May 4 or RECEIVED by May 8, 2012. Due to planning & seeding needs, late or day-of-event entries will not be accepted.

SCHEDULE:

Saturday, May 12, 2012

8:45-9:00am	Check-in for Open Water Clinic
9:00-11:00am	Open Water Clinic
12:00-12:45pm	Warm-up for Pool Meet
1:00-5:00pm	Pool Meet

Sunday, May 13, 2012

7:00-7:45am	Check-in for Open Water Swim
7:10-7:55am	Warm-up
8:00am	Mandatory Pre-race Meeting
8:15am	Heat #1 of the 1200-meter Swim & subsequent heats as needed
At the end	Brunch & Awards

CLINIC INFORMATION (Sanction 372-W002)

CLINIC: This basic open water clinic is targeted specifically to those with little or no experience in open water swimming (although all are welcome). It will feature in-water instruction & practice of these skills and a pool-side Q & A session:

- Straight-line swimming
- Swimming in crowds
- Navigating
- Drafting
- Rounding buoys

CLINICIAN: Bob Bruce, longtime Oregon Masters Swimming Long Distance Chair & member of the USMS Long Distance Committee. Bob is an expert clinician who is also an avid open water swimmer & several-time USMS Long Distance All-Star. Bob has coached swimming for more than 40 years, and was honored as the 2003 USMS National Coach-of-the-Year.

FEE FOR CLINIC: \$20. This clinic is limited to 30 swimmers on a first come first served basis.

OPEN WATER SWIM INFO (Sanction 372-W003)

1200-METER SWIM: This is a pool open water swim held as 12 loops of a rectangular 100-meter course marked with buoys. Swims will start in-water in seeded heats & waves, with 12-18 swimmers each heat, and finish with an in-water touch. Swim direction will be decided by coin toss at the pre-race meeting. This is planned to be an intensive early-season open water learning experience & fun challenge for first time racers & experienced competitors alike!

RULES: Current USMS long distance rules apply. Only Category I swimwear is allowed; see the event website for swimwear details. Propulsive devices (such as fins & paddles) and flotation aids (such as pull-buoys & wetsuits) are not allowed. Swim caps are not required, but all swimmers must have their race number written on both arms.

SEEDING: Swimmers will be seeded in heats fastest to slowest by 1000-yard times. 'No Time' entries will not be accepted. Seeding changes will not be allowed after the heat sheet is posted. Enter an accurate time, not a predicted time!

FEE FOR OPEN WATER SWIM: \$25. Fee includes the swim, pre-swim snacks & drinks, and the special post-swim brunch.

AWARDS: USMS age groups are 18-24, 25-29, 30-34, and so on in five-year increments. All finishers placing 1st to 3rd in their age group will be awarded custom race ribbons.

RESULTS: Results will be posted at the event site and at www.comaswim.org and www.swimoregon.org.

OREGON OPEN WATER SERIES: The swim is a featured swim for the Series (22-18-16-14-12-10-8-6-4-2 pts).

DIRECTIONS: From North or South, take Business 97 (3rd St.). Do not take the Bypass Parkway. Turn on Highway 20 (Greenwood Av.), traveling east. Turn right on 6th St., and go south two blocks to the pool. Park in the upper lot or on adjacent streets.

COMPLETE INFO & EXTRAS: www.comaswim.org

EVENT DIRECTOR: Bob Bruce
coachbob@bendbroadband.com

541-317-4851



LAKE JUNIPER OPEN WATER SWIM
Open Water Clinic & 1200-meter Pool Open Water Swim
Bend, Oregon – May 12-13, 2012

Hosted by Central Oregon Masters Aquatics
 Sanctioned by U.S. Masters Swimming #372-W002-3



ENTRY FORM

If possible, save time, paper, and errors by registering online. Thanks!
https://www.ClubAssistant.com/club/meet_information.cfm?c=1756&smid=3779

SWIMMER INFO:

Name: _____ 2012 USMS Number: _____
 Address: _____ Phone: (____) _____
 City: _____ State: _____ Zip: _____ Birthdate: _____ Age: _____ Sex: _____
 E-mail: _____ USMS Club: _____ Local Team: _____

EVENT & FEE INFO:

	<u>Fee</u>	<u>Paid</u>
Basic Open Water Clinic on Saturday (limited to 30 swimmers, first come first served)	\$20	_____
Lake Juniper 1200-meter Swim Sunday – Seed time for 1000-yards (REQUIRED): _____	\$25	_____
Sunday Brunch for guests 12 & over (open water swim participants FREE): _____ Guests @ \$8	\$8	_____
USMS/OMS One-Event Membership Fee, ONLY IF NEEDED (complete form at event check-in)	\$18	_____
TOTAL		_____

WAIVER: “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 the possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MATSTERS SWIMMING PROGRAM OR ANY ACTIVITIES THERETO, I HEARBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAMGE, INCLUDING ALL CLAIMS FOR LOSS OR DAMAMGES 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 ACTIVIIITES. 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:** _____

Include Completed Entry Form, Copy of USMS Card, & Check (payable to COMA)
Send Entries by May 4 to Bob Bruce, 61200 Parrell Rd., Bend, OR 97702-2602