

3rd Annual Stephen Billeaud Memorial Swim Meet (Lafayette)

Date: Saturday, April 27th 2013

Times: Warm Up 8:30-9:10AM. 9:15-9:25 Ceremony in honor of Stephen Billeaud. Meet Starts 9:30 a.m.

Sanction # Sanctioned by the Southern LMSC for USMS Inc. (Pending)

Facilities: Out door 8 lane 25 yard course, 4 feet depth to 6.5 foot depth & a 4-lane 25 meter indoor pool available for warm-up & cool down during the meet.

Crawfish Aquatics
107 Susan Street
Lafayette, LA 70506

Rules/Eligibility: 2013 USMS Rules shall govern. All participants must be registered with United States Masters Swimming. A copy of your USMS card is required with the completed entry.

Age Groups: 19-24, 25-29, 30-34, 35-39, 40-44, etc (increasing in five-year increments).

Results: Will be available after the meet on the Internet at www.crawfishaquaticslafayette.com

Director: Thomas Clavier thomaspclavier@gmail.com (504)236-4005

Awards: Order of finish will be determined by adding a swimmer's time from the five events in a single course. Awards will be presented to the first-place finisher in each age group, male and female, in each course. Participants may enter the meet and swim less than five events in a specified course. However, they will be ineligible for awards.

Registration: The current 2013 USMS registration card is valid through December 31, 2013. All entries must be postmarked by April 20, 2013. No late Entries will be accepted

Seeding/Prediction: Swimmers will be seeded slowest to fastest by predicted cumulative time as noted on the entry form. Add your projected times from the five events in your selected course to obtain a predicted cumulative time. Prizes will be awarded to the male and female in each course whose actual cumulative time is closest to predicted cumulative time. If no predicted time, put NT.

Entry Fee: \$30.00 payable to **Crawfish Aquatics**

Prior to April 20, please mail completed entry form, copy of USMS card, and check (payable to Crawfish Aquatics) to:

Crawfish Aquatics: ATTN:Pentathlon
107 Susan Street, Lafayette, LA 70506

****ENTRY FORM****

3rd Annual Stephen Billeaud Memorial

Sanctioned by the Southern LMSC for USMS Inc.,

Name: _____ Age (as of 4/27/2013): _____ Sex: _____

Address: _____ City/State: _____

Zip Code: _____ Phone: _____ USMS #: _____

Team Name: _____ Team Abbreviation: _____

Email Address: _____

Check desired course. Choose only one course. All distances are in yards. Swimmers can opt to swim up to five races. To accurately seed swimmers please fill out the entry time sheet. Times do not have to be exact. If you do not know your times fill out NT in the blanks for the events you would like to swim.

_____ Ironman (200 fly, 200 back, 200 breast, 200 free, 400 IM)

_____ Middle Distance (100 fly, 100 back, 100 breast, 100 free, 200 IM)

_____ Sprint Distance (50 fly, 50 back, 50 breast, 50 free, 100 IM)

Predicted cumulative time/seeding time (see entry information): _____

Note: the overall Order of events shall begin with the 200 fly, then 100 fly, 50 fly, the 200 back, 100 back, 50 back, then 200 breast and so forth.

Stroke	200	100	50
Butterfly			
Back			
Breast			
Free			
I.M.			
Total time			

LIABILITY 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 those risks. AS A CONDITON 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 FOR DAMAGES CAUSED BY NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITEES, 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: _____

Mail completed entry with USMS card copy and \$30.00 entry fee payable to Crawfish

Aquatics to:

Crawfish Aquatics: ATTN: Pentathlon

107 Susan Street

Lafayette, LA 70506.