## to benefit St. Malachi Center

# **Urban Kids' Swim Camp**



## Sponsered by O\*H\*I\*O Masters Swim Club,

### Sanctioned by: Lake Erie LMSC for USMS Inc.

EVENTS: There will be  $\frac{1}{2}$ -Mile. 1-mile and 2-mile swims on a triangular course in Lake Erie. The start will be in the water. The finish will be on the beach. Swimmers will swim in a clockwise direction around the course. Multiple heats will start 4 minutes apart. The number and makeup of heats will be determined by the Event Director based on the final number of entries. Heat information will be emailed to swimmers prior to Race Day. THERE WILL BE A WETSUIT DIVISION THIS YEAR. WET

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SUIT SWIMMERS WILL BE ELIGIBLE FOR AWARDS AND FOR OFFICIAL PLACING WITHIN THE WET SUIT DIVISION.

LOCATION & DIRECTIONS: The event will be held at Edgewater Beach within Cleveland Metroparks, which is located approximately two miles west of downtown Cleveland, Ohio off the Route 2 Memorial Shoreway. At the bottom of the exit ramp, go straight across to the large parking lot and to the pavilion at the far end of the parking lot.

**RULES:** Current 2015 USMS Rules will govern this event.

## Sunday, July 19, 2015

Sanction Number: 185 - W001

#### **RACEDAY TIMELINE:**

Check-in	6:45 am
Pre-race Instructions	7:45 am
Start of First Heat	8:00 am

**ENTRIES:** Online registration at <u>www.ohiomasters.com</u>. Click on the Meet Entries tab. Online entries close at midnight July 14, 2015. Paper entries must be received by the Event Director by midnight Tuesday, July 14, 2015.

\* NO RACE DAY ENTRIES \*

**ELIGIBILITY:** 2015 USMS registration is required of ALL participants. One Event USMS Registration is available for an additional fee.

FEES: Event Entry Fee\$45.00USMS One Event Registration Fee\$19.00\*FEES ARE NON-REFUNDABLE\*

CONTACT: Event Director: Beth Katterle Ph: 440/331-4301 E: <u>kattcando@hotmail.com</u>



AGE GROUPS: 18-24, 25-29, 30-34, etc. in five year increments as high as necessary for both men and women.

AWARDS & SOCIAL: The Awards Ceremony and Social will follow completion of all events. New this year - completion awards! Awards will be given to the first six places in each age group for both men and women.

**CHECK-IN:** Participants who are not known to our check-in volunteers may be required to show Photo ID.

**SAFETY:** The Event Safety Plan will be emailed to all participants prior to Race Day. In addition, all swimmers must wear the electronic timing chip and swim cap provided at check-in and have their race number put on their arm.

**WATER TEMPERATURE:** Anticipated water temperature will be in the range of 72 to 76 degrees.

**TIME LIMIT:** A 90 minutes time limit will be in effect for all swimmers.

**EVENT SPONSOR: Aquatic Outfitters of Ohio,** 7223 Whipple Ave., NW, North Canton, Ohio 44720. PH: (330)498-9179.

#### CHARITY FUNDRAISER:

Proceeds from the event support the **St. Malachi Center's** (Tax ID # 34-1506478) **Urban Kids' Swim Camp**. Donation Forms are available on-line and upon request from the Event Director. Awards for fundraising will be at the \$125, \$250 and \$500 levels.

**RESULTS:** Meet results may be found at www.ohiomasters.com within a few days after the meet.

Dates to remember:

race day: July 19, 2015

last day to register: July 14, 2015

last day to donate: (for prizes) July 19, 2015

Online registration available here:

https:// www.clubassistant.com/ club/ meet\_information.cfm? c=1236&smid=6636

Donation sheet, registration form, and One Event Registration Form attached.



# DONATION SHEET

Proceeds from the event support the <b>St. Malachi Center's</b> (Tax ID # 34-150 <b>Camp</b> . For donations exceeding \$125, the Primary Donor will earn an event exceeding \$250, the primary donor will also earn an event towel. For donational donor will receive a gift certificate from Aquatic Outfitters.	sweatshirt. For donations
Name of Primary Donor:	
Phone of Primary Donor:	
Donations are from the following individuals:	
Name	Amount

The O\*H\*I\*O Masters Swim Club and the St. Malachi Center gratefully acknowledge and appreciate the generosity of all donors for contributions large and small.

## **MEET ENTRY FORM**

Please attach a copy of your 2015 USMS Registration Card or proof of membership in another recognized masters swimming organization.

S 1	Sponsored by O*H* 2-Mile, 1-Mile & 2- Sunday nctioned by: Lake	<sup>r</sup> I*O Masters S Mile Open Wa July 19, 2015	ater Races
NAME:			#: not a registered member of USMS, include
		One Event	Registration Form with your entry.
ADDRESS:		CLUB	3 NAME:
CITY:	STATE:	ZIP:	CLUB ABBR:
DATE OF BIRTH:	AGE(on 7/19	/15): G	ENDER(circle one): M F
PHONE (home):	e	mail:	
		So we can	acknowledge receipt of your entry form. PHONE:
CIRCLE THE DISTANC	E YOU WILL SWIN	<i>I</i> : ½-Mile 1-	MILE 2-MILE
WETSUIT(circle one):	NO YES		
FEES: Event Entry Fee USMS One Even	T-SHIRT SIZE (ind t Registration Fee rent Registration Form	\$45.00 \$19.00	ee): S M L XL XXL
Circle the correct to Make Check Payab	tal: \$45.00	\$64.00	A CLUB
MAIL ENTRY FORM, US	SMS REGISTRATI	ON CARD OI	R USMS ONE EVENT REGISTRATIO
FORM AND CHECK TO	: Beth Kat		iewood Drive
DEADLINE: July 14, 20 <sup>4</sup>	<mark>15</mark>	-	River, OH 44116

USMS 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 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 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. Finally, I specifically acknowledge that I am aware of all the risks inherent on open water swimming and agree to assume those risks."

SIGNATURE:



#### Register with the same name you will use for competition. Please print clearly.

Last Name				First Name		MI	
Street Address							
City/State/Zip		Phone					
Date of Birth (mm/dd/yy)	Age	Sex (ci		E-mail address			
		Μ	F				
Event Name and Location							
Signature (required)					Today's Date (required)		

#### Instructions:

- 1) Fill out both pages of this form. Page 1 is the application; Page 2 is the participant waiver. **Both pages** must be signed and dated by the participant.
- 2) Make check for \$19.00 total fee (\$15.00 USMS plus \$4.00 LMSC) payable to: O\*H\*I\*O Masters Swim Club
- 3) Meet Director should retain one copy of the signed forms for his state's applicable personal injury statute of limitations time period
- 4) Meet Director should mail check and completed forms (both Pages 1 and 2) to the LELMSC registrar.

Page 1 – This form cannot be accepted without being accompanied by Page 2 waiver. Form revised 1/19/2015