

Twin Cities Open Water 1/2 Marathon

Four Stages (6 swims) = \$300

	STAGE I	STAGE II	STAGE III	STAGE IV
DATE:	Sat., Jun. 25, 2016	Sat., Jul. 16, 2016	Sat., Aug. 13, 2016	Sat., Sep. 10, 2016
DISTANCE:	1 mi & 2 mi	5 k	5 mi	2 mi & 1 mi
LOCATION:	Lake Harriet North beach	Lake Rebecca Lake Rebecca Beach	Lake Minnetonka Wayzata Beach	Lake Minnetonka Wayzata Beach
CHECK IN:	6:30am	6:30am	7:00am	7:00am
SAFETY:	7:15am	7:15am	7:45am	7:45am
START:	1 mi – 7:30am 2 mi – 8:30am	7:30am (1.5 hrs) 7:45am (< 1.5 hrs)	8:00am (3+ hrs) 8:10am (2.5-3 hrs) 8:20am (2.25-2.5 hrs) 8:30am (< 2.25 hrs)	2 mi – 8:00am 1 mi – 9:30am
FINISH:	North Beach	Beach	Wayzata Beach	Beach
COURSE:	1 mi – 1 loop, clockwise 2 mi – 2 loops, counter-clockwise	2 loop, counter-clockwise	straight line across	straight line, out/back
CLOSED:	1 mi – 45 min 2 mi – 90 min		11:30am	
FEES:				
Early	\$50	\$50 per person	\$55 per person	\$45
Mid	\$55	\$55 per person	\$60 per person	\$50
Race Day	\$65	\$65 per person	\$70 per person	\$55

SAFETY IS PARAMOUNT: Positive check-in and safety meeting is required for all swimmers prior to the start of each stage. Failure to abide by this may result in disqualification. Swim caps provided and body marking are required. **SWIMMER ELIGIBILITY:** Must be USMS registered (www.usms.org/reg) or USA Swimming.

RELAYS: Available for 5 mi swim (2 mi, 2 mi, 1 mi), and 5k swim (2.5k each).

EVENT LIMITATIONS: 100 participants

RACE DAY REGISTRATION: USMS/USA Swimming Card & photo ID.

COURSE RULES: Safety personnel will patrol the courses. **Escorts required on Stage III**, but prohibited on all other stages. Use of swimming aids (hand paddles, buoys, fins, etc.), wetsuits and/or swimsuits that are made of fabric that provides floatation or floatation devices will be permitted, but not be eligible for awards. Please contact the race director if you have questions about swimwear.

AWARDS: TBD

PARKING: Public parking – abide by posted parking restrictions.

WATER TEMPERATURE: Approximately 70F – 80F.

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ONLINE REGISTRATION PREFERRED (or email form to minnetonkachallenge@gmail.com)

Circle one: Individual Relay

Circle one: Men Women Mixed

OPTION I: TCOWHM

OPTION II: SELECT STAGE(S) BELOW

Circle Stage(s): LH1 LH2 LR5k LM5m JJ2 JJ1

Swimmer _____

USMS/USAS # _____

Address _____

City _____ Zip _____

Email _____

Phone _____

For 2 or 3 person relays:

Swimmer (2) _____

USMS/USAS # _____

Address _____

City _____ Zip _____

Email _____

Phone _____

Swimmer (3) _____

USMS/USAS # _____

Address _____

City _____ Zip _____

Email _____

Phone _____

Relay Name: _____

Age Group (relay age group is dependant on the youngest relay member)

18+ 25+ 30+ 35+ 40+ 45+ 50+ 55+ 60+ 65+ 70+ 75+

T-shirt size requested:

Adult XS S M L XL XXL

Additional T-Shirts requested (\$15 each):

Adult XS S M L XL XXL

Qty _____ x \$15 = \$ _____

Online registration preferred; otherwise, use this page and sign & return waiver.

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PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle) M F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed

Revised 07/01/2014