

OMAHA MASTERS SWIM CLUB SPRING SWIM MEET SUNDAY, APRIL 30, 2017



Sanctioned by the Nebraska LMSC USMS Sanction #297-S002

Hosted by: Omaha Masters Swim Club

Meet Director: Erin Sullivan, nbchair@usms.org

Location: The Salvation Army Kroc Center

2825 Y St

Omaha, NE 68107



Meet Schedule: Warm-up #1 - 8:15 AM - 8:45 AM, Event 1 (1000 free) begins at 9:00

Warm-up #2 – will begin as soon as the 1000 is finished and will last for 30

minutes. Event 2 (200 Free) will begin no earlier than 10:00am.

Nebraska LMSC Annual Meeting: The Nebraska LMSC will hold its annual meeting after the completion of the 1000.

<u>Rules:</u> Unless otherwise stated, current USMS rules will govern the conduct of the meet. All participants must be registered members of U.S. Masters Swimming for 2017. All events are timed finals and will be pre-seeded slowest to fastest with women and men seeded together. Relays may be either men, women or mixed. Your age as of April 20, 2017 determines your age group for the meet.

<u>Facility:</u> The Kroc Center is a 6 lane, 25 yard pool. The 1000 yard Free will be swum using a 6 lane format. For the remainder of the events, a 5 lane format will be used with one lane designated as a continuous warm-up/cool down lane. The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1.

Event Limitations: Swimmers may swim a maximum of 5 individual events and 2 relays.

Entry Information and Fees: Meet entry fee is \$20.00. The Meet is open to all 2017 USMS registered swimmers. One-event membership will not be available. You may register for USMS at the meet or online at www.usms.org. Deck entries will be accepted on the day of the meet until 8:30 AM for the 1000 and until 9:30 AM for all other events. The entry fee for Deck Entries is \$25.00. Entries fees are non-refundable. A copy of your 2017 USMS registration card must be included with your entry form. You MUST include the completed Participant Waiver with your entry form.

All proceeds from the meet will be donated to the Kroc Center swim program.

Relays may be deck entered. Please complete the event cards for relays when you check-in.

All swimmers MUST pick up an event card BEFORE proceeding to the blocks for each event.

Make all checks payable to: Omaha Masters Swim Club

Mail checks and entry forms to: Erin Sullivan 5006 Cass St, Apt 2 Omaha NE 68132-2979

ENTRY FORM

Omaha Masters Meet at the Kroc

Sunday, April 30, 2017, The Kroc Center, Omaha, NE Sanctioned by the Nebraska LMSC for USMS, Sanction #297-S002

Name:	USMS#					
Street Address:		City/State/Zip				
Gender:	Age (as of 4/30/17):	Birthdate:	/	/		
USMS Club Name:_		USMS Club#:				
Email Address:						

Please circle the event # and enter seed time or NT for no time

EVENT #	EVENT (Short Course Yards)	SEED TIME
1	1000 Free	
2	200 Free	
3	50 Fly	
4	400 IM	
5	200 Free Relay	
6	200 Breast	
7	50 Free	
8	200 Back	
9	50 Breast	
10	200 IM	
11	200 Medley Relay	
12	100 Fly	
13	500 Free	
14	50 Back	
15	200 Fly	
16	100 IM	
17	100 Back	
18	100 Breast	
19	100 Free	



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.

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