**11th ANNUAL Concord Masters Mini Meet Sunday, October 29, 2017**

# Hosted by the CCHS Swim and Dive Team to support the 2017-2018 season at the Beede Swim and Fitness Center in Concord, Massachusetts.

**ENTRY FORM**

## Meet registration: Recognized by NE-LMSC for USMS Inc. Sanction number: \_\_\_\_\_\_

***Must be 18+ years of age; USMS Membership NOT Required.***

### **Location:** Beede Swim and Fitness Center, 498 Walden Street, Concord, MA On the campus of Concord-Carlisle High School

**Time:** 7:45 am **Warm-up**, 8:45 am **Start,** 12:15 pm **Finish**

**Format:** Short-course meters.

## Entry Fee: $25.00 entry fee and $5 per event (maximum 5 events)

**Please make checks payable to “Friends of CCHS Swim + Dive” Mail to: FOSD, PO Box 273, Concord, MA 01742**

***\*\*******\*PL******E******ASE EMAIL Registration Information to: ConcordMastersMeet@gmail.com******\*\*\****

## Meet Directors: Matt Goldberg, mgoldberg@concordcarlisle.org

## Information contact: Kathi O’Neil and Tracey Guth, CCHSFOSD@gmail.com

**Entries due by October 27, 2017. Limited to first 150 entrants.**

**Order of events –** insert estimated or actual seed time next to the events you are entering (format mm:ss.00)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1  | 100m Butterfly | 5  | 100m IM |  | 9  | 50m Breaststroke |
| 2  | 50m Backstroke | 6  | 200m Freestyle | 10  | 100m Freestyle |
| 3  | 100m Breaststroke | 7  | 50m Butterfly | 11  | 200m IM |
| 4  | 50m Freestyle | 8  | 100m Backstroke | 12  | 400m Free |
| Enter Total Number of Events  | X $5.00 = |  \_  | + $25 meet entry fee | =  | \_\_\_\_\_\_  |
| Optional donation to support the CCHS Swim and Dive Team …….. |  |  | =  |
|  |  |  |  |  | Total Due | =  | \_\_\_\_\_\_\_ |
| Last Name |   | First Name  |  |  | USMS Reg.#  |
| Birth Date |   | Age  | (as of 12/31/17) | Male |  Female  |
| Phone |   | Email  |  |  |  |

**Pool Length Statement:** 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

Swimmer’s 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 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 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 ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS.

**Signature: Date:**