2017 Last Chance Meters Meet (SCM)

hosted by YW Masters of Adams County & the YWCA Gettysburg Sharks Swim Team Gettysburg, PA

Saturday, November 11, 2017

(Warm-Up at 8 A.M., Meet starts at 9 A.M.)

USMS Sanction # 087-S003

Location: YWCA Gettysburg & Adams County Natatorium

909 Fairfield Rd

Gettysburg, Pa 17325

Entries: You can register online at Club Assistant: Entries will close Thursday

November 9th. The meet is open to all Masters Swimmers holding a valid 2017 or 2018 USMS registration card. Age group is determined by the age

as of December 31, 2017. 2017 USMS rules and regulations apply.

Registration fee is \$25 with no deck entries allowed (with the exception of relays). There is a \$5/individual event and \$8/relay fee. Every swimmer on a relay must be in at least one individual event. We will have a civil war (deck entered) 100 meter fun relay. Swimmers are to start from the wall and not the starting blocks. Swimmers are to swim any stroke for 25 meters wearing a civil war cap, then, hand it to the next swimmer, until all

four swimmers have completed their 25 meters.

Facility: Indoor, 25 meters, six lanes pool with anti-turbulent lane lines and

Colorado timing system touch pads. One lane will be a dedicated warm-up and cool-down lane. Starting blocks at the deep end of the pool (12 ft), the shallow end is 3ft 6 inches. Parking is available and there is seating for 70 people on bleachers. Everyone is welcomed to bring their own folding chair. A community room across from the pool will be available for another 75 people. Men's and women's locker rooms and lockers are available.

You are welcomed to bring your own lock. Facility is accessible for adaptive swimmers. The length of the competition course is in compliance and on file with USMS in accordance with article 105.1.7.

Seeding: Events and heats will be seeded slowest to fastest, mixed gender and age

groups. Positive check-in is required for all events.

Psych Sheets: Psych sheets will be handed out to swimmers at the meet.

Awards: First, second and third ribbons will be awarded for each event.

Results: Available on-line at www.ywcagettysburg.org. Results for sanctioned

events will be submitted for Top-Ten recognition and national records.

Directions: From the South:

I-270 North US-15 North

PA-116 West/Fairfield Rd

From the North: US-15 South

US 30 West/York Rd and W. Middle St. to PA-116 West/Fairfield Rd

From the East:

I-76 West US-15 South

US 30 West/York Rd and W. Middle St. to PA-116 West/Fairfield Rd

Questions: Meet Director: Cora Rhoads 717-334-9171 ext. 129

or crhoads@ywcagettysburg.org

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Sanctioned by DVLMSC for USMS, INC. \$5 per individual event

PRINT N	IAME	_ Gender	AGE
DATE OF BIRTHADDR		RESS	
TEAM	or UNATTACHE	U	ISMS#
			Seed Time
1.	200 m Freestyle		
2.	100 m Backstroke		
3.	50 m Breaststroke		
4.	200 m Backstroke		
5.	100 m Freestyle		
6.	50 m Butterfly		
7.	200 m Breaststroke		
8.	200 m Freestyle (Mixed) Relay (deck	entered before 9:	30) xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
9.	200 m Medley (mixed) Relay (deck en	ntered before 9:2	0) xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
10.	100 m Butterfly		
11.	100 m Individual Medley		
12.	100 m Breaststroke		
13.	50 m Backstroke		
14.	200 m Individual Medley		
15.	50 m Freestyle		
*16	5. 100 m Civil War (mixed) Relay (deck	entered before 9	:30)xxxxxxxxxxxxxxx (unofficial



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"):

- 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.
- 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 ("Lability") 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.
- 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 (ci	rde) F	Date of Birth (mm/dd/yy)				
Street Address, City, State, ZIp									
Signature of Participant					Date Signed				

Revised 07/01/2014