2017 Puget Sound Masters SCM Championship Meet Saturday –Sunday, November 18-19, 2017 Hosted by Puget Sound Masters Sanctioned by PNA for USMS Inc. #367-S008 Observed for USA Swimming

LOCATION: Weyerhaeuser King County Aquatic Center, 650 SW Campus Drive, Federal Way, WA 98023 206-296-4444

FACILITY: 50-meter championship pool set up as two 25m courses, each with 9-ft wide lanes and a water depth range of 9'-10.5' Continuous warm-up available in 7-lane, 25-yd dive tank. The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1, but as a bulkhead course, is subject to length confirmation. Eligibility of times for USMS Top 10 and Records will be contingent on verification of bulkhead placement.

TIMES: Saturday, Nov 18 & Sunday, Nov 19:

• Warm-up 9:00-9:50am, meet starts 10 am

MEET DIRECTOR: Lisa Dahl, Idahl@usms.org 206-337-2204

MEET REFEREE: Teri White - teriwhite53@gmail.com

CONCESSIONS: Vendor contracted with KCAC, available in lobby.

RULES: Current USMS rules will govern the meet. Strictly forbidden: Using hand paddles, fins or kick boards in warm-up areas; Diving in warm-up areas unless in designated sprint lanes.

ELIGIBILITY: Open to all 2017 USMS or foreign registered swimmers 18 and above as of 11/19/2017. Age groups based on the swimmer's age as of 12/31/2017. 18-24, 25-29... and up in 5-yr increments

ENTRIES: Swimmers may enter up to 6 individual events, 5 individual events/day max.

- Individual entries and Relay-Only Swimmers: Entries must be submitted online by 11:59 PM (Pacific)
 Sunday, November 12th, 2017 OR postmarked by Wednesday, November 8, 2017
- Relay teams may be entered from 9:00 AM Monday, November 13th to 11:59 PM Thursday, November 16th
- Deck entry for relays will also be available at the meet. See 'Relays', below.
- Swimmers will register by CLUB (i.e. PSM, BWAQ) rather than workout group (i.e. LWM, GLAD)

NO INDIVIDUAL ENTRIES ACCEPTED AFTER SUNDAY NOV 12TH, 2017 11:59 PM (PACIFIC TIME)

SEEDING: At the discretion of the Meet Referee and Meet Director, two courses may be used for the 800 Free, 400 Free, and 1500 Free. A single course will be used for all other events. All events slow to fast. Pre-seeding except for asterisked events, below.

CHECK-IN: Saturday: 800 Free – 9:30am; 400 IM – 9:30am; Sunday: 400 Free – 9:30am, 1500 Free – end of Event #34.

Swimmers missing the check-in deadline will be scratched from the event.

RELAYS: Age groups (sum of ages): 72-99, 100-119, 120-159, 160-199, 200-239, 240-279, ... (40-year increments as high as necessary). The aggregate age of the four relay team members determines the relay age group. Mixed relays require two men and two women.

- Relays may be entered online before the meet or deck-entered at the meet. Online entry deadline above.
- Deck Entry Relay entries due as follows:
- #11-#13: by the end of event #2,
- #20-#21: by the end of event #13,
- #31-#33: by the end of event #22,
- #40-#41: by the end of event #33

AWARDS:

ASTER

- Medals may be purchased at meet.
- High point awards for each gender and age-group combination

ENTRY FEES: \$38.00 includes LMSC surcharges. **PLUS** \$4 per individual event (optional for seniors and needs-based swimmers). No charge for relays. Relay only swimmers pay \$38.00 surcharge.

ONLINE ENTRIES: Enter online at:

https://www.ClubAssistant.com/club/meet information.cfm?c =1534&smid=8997

ENTRY QUESTIONS: Linda Chapman: 425-890-3751

2017 PSM SCM Order of Events							
Sa	aturday, Nov 18	Sunday, Nov 19					
50m, 100m and 200m events: Order W then M							
	Warm Up 9am		Warm Up 9am				
1	800 Free - Mixed *	22	400 Free - Mixed *				
2	400 IM -Mixed *	23/24	200 IM - W/M				
3/4	100 Back - W/M	25/26	50 Fly - W/M				
5/6	50 Breast - W/M	27/28	200 Back - W/M				
7/8	200 Free - W/M	29/30	100 Free - W/M				
9/10	100 IM - W/M		Break 5 minutes				
	Break 5 minutes	31/32	W/M 400 Medley Relay				
11/12	W/M 200 Medley Relay	33	Mixed 200 Free Relay				
13	Mixed 400 Free Relay	34/35	100 Fly - W/M				
14/15	100 Breast - W/M	36/37	200 Breast - W/M				
16/17	200 Fly - W/M	38/39	50 Back - W/M				
18/19	50 Free - W/M		Break 5 minutes				
	Break 5 minutes	40/41	W/M 200 Free Relay				
20	Mixed 800 Free Relay	42	1500 free - Mixed *				
21	Mixed 200 Medley	*	Positive Check-In Required				

DIRECTIONS: From North or South Bound I-5 take exit 142 B. Proceed west on South 348th St for 2 miles. South 348th changes to SW Campus Dr. at 1st Ave. The pool is on the right.

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PAPER ENTRIES: Complete this form, and waiver on following page, for a paper entry.

If using paper entry form, you must complete, sign and mail the USMS Waiver on the following page.

NAME:				_ M F AGE:
ADDRESS:				
CITY:			STATE:	ZIP:
PHONE		Email_	· · · · · · · · · · · · · · · · · · ·	
BIRTHDATE:	/		USMS #:	
Include a copy o	f your USM	S Registrat	ion if not a PNA memb	oer
LMSC: (PNA, Oregon, etc.)	, Inland NW,	PNA Club: (U	C36, BWAQ, PSM, ROCK)	
			r day) PLUS RELAYS	
Event #	Event N	ame	Entry Time	
ENTRY FEE:				
SURCHARGE	\$38.00			
Individual Events	+		No charge for relays. seniors (65+) or need-	
TOTAL		to: PSM, c/o	payable to PSM. Mail Linda Chapman	
	\$	17532 NE Redmond	142 nd St , WA 98052	
	a valid 2017 U	SMS (or foreig	ovember 7 th , 2017. All n) registration prior to meet entry.	
Signature			Date	
This is my first N	lasters meet			



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.
- 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 (cir	,	Date of Birth (mm/dd/yy)				
			M	F					
Street Address, City, State, Zip									
Signature of Participant	Date Signed								