



3rd Annual Last Chance at Warren Masters Meet

Saturday, December 16, 2017

Hosted by Indy Aquatic Masters
Sanctioned by GRIN for USMS: #167-S009



LOCATION: Warren Central High School, 9500 East 16th Street, Indianapolis, IN 46229. *Note:* Please enter through Door #14.

FACILITY: The WCHS Aquatic Center pool is an 8-lane, 25 meter pool. Six lanes will be used for competition. A separate diving well is available for warming up and warming down. The competition pool depth ranges from 4'6" to 6'. There is deck seating for 500 competitors.

POOL: 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.

RULES: Current 2017 U.S. Masters Swimming rules will govern the conduct of this meet.

ELIGIBILITY: The meet is open to anyone 18 and older. All entrants must be registered with U.S. Masters Swimming or a member of a FINA-recognized National governing body. Each swimmer is eligible to swim a maximum of five (5) individual events and two (2) relays.

REGISTRATION: [Online registration through Club Assistant](#). For assistance completing the online registration process, please contact Michelle C. Harter at 317-965-2456 or info@indyaquaticmasters.com.

AGE GROUPS: The swimmer's age is determined as of December 31, 2017. Age categories are 18-24, 25-29, 30-34, etc.

ENTRY FEES: Online entry is a \$35 flat fee (maximum of 5 individual events). Deck entries will be accepted for a flat fee of \$45.

EVENT DEADLINES: Online entries must be received by Tuesday, December 12 at 11:59 PM EDT. *Deck entries and relay cards must be turned in by 8:30 AM on the day of the meet.* Online entries:
https://www.clubassistant.com/club/meet_information.cfm?c=1526&smid=9606

EVENT SEEDING: All heats will be seeded slowest to fastest.

RELAYS: Swimmers may only swim once in each of the following relays: 200 Free and 200 Medley. For example, a woman may not swim in the Mixed 200 Medley Relay and the Women's 200 Medley Relay.

WARM-UP PROCEDURES: Swimmers must enter the pool feet first in a cautious and controlled manner. No diving or backstroke starts will be allowed, except in designated sprint lanes. One or two lanes shall be designated as one-way sprint lanes during the pre-meet warm-up sessions in the competition pools only. Any swimmer who acts in an unsporting or unsafe manner within the swimming venue may be considered for appropriate action or penalty by the referee (Rule 102.15.3). Pull-buoys, kick boards, fins and hand paddles are not allowed in competition or warm-up pools.

SCORING & AWARDS: Individual events: 11-9-8-7-6-5-4-3-2-1. Relays shall score double the individual event point value. There will be no awards.

RESULTS: Will be posted on both the Indy Aquatic Masters website and the GRIN website.

COMPETITION SCHEDULE:

8:00am Warm-Up Starts
8:30am Designated Sprint Lanes Open
8:50am Warm-Up Ends
9:00am Competition Begins

ORDER OF EVENTS:

Warm-Ups at 8:00am
Meet Starts at 9:15am

400 Free
200 IM
50 Free
100 Fly
200 Breast
50 Back
200 Fly
50 Breast
200 Free Relay
100 IM
200 Free
50 Fly
100 Back
100 Breast
100 Free
200 Back
200 Medley Relay
400 IM

QUESTIONS: For questions or additional information, please contact Michelle C. Harter at info@indyaquaticmasters.com.

EVENT WEBSITE: www.indyaquaticmasters.com

MEET DIRECTORS: Mel Goldstein - goldsteinmel@sbcglobal.net / Dean Hawks - d23hawks@yahoo.com



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ENTRY INFORMATION

Name: _____ Gender: _____ Age: _____ DOB: _____

Address: _____

Phone: _____ Email: _____

USMS#: _____ Team: _____

Please write in the time you wish to be seeded under or "NT" for no seed time in the events you would like to swim. Women's events are Odd Numbers; Men's Events are Even Numbers. All relays will be deck entered, but please indicate your relay availability. We will have relay cards at the meet for teams to fill out. You may enter **5 individual events plus 2 relays.**

_____ #1, #2 - 400 Free	_____ #23, #24 - 200 Free
_____ #3, #4 - 200 IM	_____ #25, #26 - 50 Fly
_____ #5, #6 - 50 Free	_____ #27, #28 - 100 Back
_____ #7, #8 - 100 Fly	_____ #29, #30 - 100 Breast
_____ #9, #10 - 200 Breast	_____ #31, #32 - 100 Free
_____ #11, #12 - 50 Back	_____ #33, #34 - 200 Back
_____ #13, #14 - 200 Fly	_____ #35, #36, #37 - 200 Medley Relay
_____ #15, #16 - 50 Breast	_____ #38, #39 - 400 IM
_____ #17, #18, #19 - 200 Free Relay	

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Online entries: https://www.clubassistant.com/club/meet_information.cfm?c=1526&smid=9606

Entry forms may also be mailed to:

Michelle C. Harter, Program Administrator
Indy Aquatic Masters
PO Box 30145
Indianapolis, IN 46220



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