

The Jesse Coon Memorial Invitational Swim Meet 2018/Masters of Brazos Short Course

DATE: Saturday, January 20, 2018. Desk check-in and warm up begins at 2:15 PM. Entries will end at 3:00 PM. The meet starts at 3:30 PM. Relay cards must be in 30 minutes prior to the event.

ENTRY: Postmarked by January 18, 2018, \$40. All late (postmarked after January 18, 2018) and Deck entries, \$55.00.

FACILITIES: Eight lane, 25-yard indoor pool with regulation starting blocks. Two lanes reserved for warm up and cool down. Locker / shower facilities. Childcare is available for participants at \$5.00 per child per hour. Ages: 2 months to 8 years. **Please bring a lawn chair, we have very limited seating. Bring Warm Clothes to wear between events. The facility does not have central heat.**

LOCATION: **TruFit Athletic Club** is located at 1900 W. Villa Maria, (Villa Maria is 7.5 miles from highway 6) 1/4 mile west of FM 2818 (Harvey Mitchell Pkwy). See map below.

SPONSORS: The Masters of Brazos and TruFit Athletic Club

SANCTION: Sanctioned by Gulf Master's Swim Committee for USMS, Inc. Number ()

ELIGIBILITY: **Open to all registered US Masters Swimmers, ages 18 and over who include a copy of their USMS registration card. (New swimmers registering must email Henry Clark(clark@comp.tamu.edu) a copy of their card or bring a copy of the card to the meet. No one will be allowed to swim without a current USMS number.)**

MEET ENTRY: Complete the attached entry form. A maximum of 5 individual events may be entered, excluding relays.

AWARDS: Participation awards will be given to all entrants, and medal awards will be provided for first through third place high point earners in each USMS age/sex group. Deck entries will not be eligible for high awards. Relays do not earn points.

CONDUCT OF MEET: Event heats will be seeded by entry time (not by sex or age), and started slowest to fastest. **All deck entries will not earn points and will be seeded with a NT USMS Short Course Rules** will govern the meet. Hand held watches will be used for timing, official times will be determined according to USMS Rules and the meet will be reported to the Gulf sanction chairperson for official top ten times. 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

MEET REFEREE: Felipe Zambrano

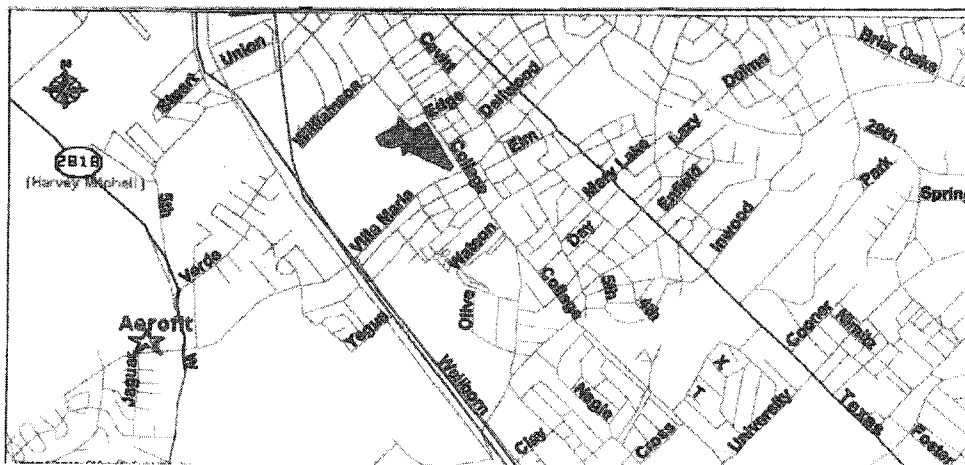
HOSPITALITY: Free fruit will be available at poolside for meet entrants.

SOCIAL: The social will be at Johnny Carino's on Hwy 30 immediately after the meet.

QUESTIONS: Contact Judy Wagner at (979) 690-1123 (H); (979) 777-6740 (C); (979) 209-7396 (O); judybwagner@hotmail.com or .Sam Bourne at TruFit (979) 823-0971 or Dustin Gutkowski at TruFit (979) 823-0971

Hotel rooms at TownePlace Suites Marriott \$109 plus tax per night, 1300 University Drive East, College Station. 77840 For Reservations call (979-260-8500) ask for Jesse Coon TruFit Swim Meet Make **Reservations before Jan. 9th.**

* Results may be accessed on the web at "<http://www.gulfmastersswimming.org>".



TRUFIT ATHLETIC CLUB 1900 W. Villa Maria

Bryan, TX 77807 (979) 823-0971

The Jesse Coon Memorial Invitational Swim Meet 2018/Masters of Brazos Short Course Entry Form

Sanctioned by the Gulf Masters Swim Committee for USMS, Inc. Number () (Please Print Name Exactly as it appears on your USMS card) No One will be allowed to swim without a current USMS #

LAST Name: _____ FIRST Name: _____

USMS #: _____ Birthdate: _____ E-mail: _____

Team Name _____ Team Abbreviation (5 letters max): _____ LMSC _____

Swimmer's Age as of 1/20/18: _____ Sex (circle): Male Female Is childcare needed? (circle): yes no

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____ Work Phone #: _____

EVENT SCHEDULE

Circle the numbers of the events you wish to enter. Please list your seed times in the blanks as male or female (mixed may be used in relays.) Enter NT for no time. A maximum of 5 individual events may be entered, excluding relays. Swimmers will be grouped by times, but different sexes will be scored separately.

# <u>Event</u>	<u>Seed Times</u>		# <u>Event</u>	<u>Seed Times</u>	
	Male	Female		Male	Female
1 500 Free	_:._.	_:._.	11 100 IM	_:._.	_:._.
2 200 Back	_:._.	_:._.	12 200 Free	_:._.	_:._.
3 200 IM	_:._.	_:._.	13 200 Fly	_:._.	_:._.
4 100 Breast	_:._.	_:._.	14 100 Back	_:._.	_:._.
5 Medley Relays-400 Relay age _____	_:._. Mixed _____	_:._. _____	15 Freestyle Relays-800 Relay age _____	_:._. Mixed _____	_:._. _____
6 100 Free	_:._.	_:._.	16 50 Free	_:._.	_:._.
7 50 Back	_:._.	_:._.	17 200 Breast	_:._.	_:._.
8 100 Fry	_:._.	_:._.	18 400 IM	_:._.	_:._.
9 50 Breast	_:._.	_:._.	19 50 Fly	_:._.	_:._.
10 Freestyle Relays-400 Relay age _____	_:._. Mixed _____	_:._. _____ or Medley Relays-200	20 Freestyle Relays-200 Relay age _____	_:._. Mixed _____	_:._. _____
21 1000 Free (if demanded)	_:._.		22 1650 Free (if demanded)	_:._.	

Entry Fee: Entries postmarked by January 18, 2017 \$40; All late entries (postmarked after January 18th) \$55

*Make checks payable to **TruFit Athletic Club**. Mail entry form, photocopy of current USMS Registration and check to: **Swim Meet, Aerofit Health and Fitness Center, 1900 W. Villa Maria Rd., Bryan, TX 77807**

Please staple a photocopy of USMS registration here. No pending entries will be accepted.
All swimmers must send a photocopy of their USMS card in order to participate!



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.

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	