**Gil Young Memorial/NW Zone LCM Championship Meet
July 20-22, 2018**

**Sanctioned by Oregon Masters Swimming, Inc. for USMS, Inc. • Sanction #Pending**

**Eligibility:** Currently registered USMS swimmers, 18 years and older. If you are not a member of USMS, you may follow the links in this online registration to become a member of USMS.

**Hosted by:** Oregon Reign Masters and Oregon Masters Swimming

**Location:** Mt. Hood Community College Outdoor Pool
26000 SE Stark, Gresham, Oregon
7 lanes competition, elec. timing, Lane 8 for warm-up/down

**Pool Length Compliance:** 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.

**Schedule:** Friday July 20th 1pm warm up 2pm start
Saturday July 21st 10am warm up 11am start.
Sunday July 22nd 8am warm up 9am start

**Directions to Pool:**
Take I-84. Use Exit 17. Follow Frontage Road to 257th and take a right. Follow 257th past Stark St to 17th St and take a left. Take the first left after the soccer field and left again into the aquatic center parking lot.

**Meet Director:** Dennis Baker, 503-679-4601 email: bakeswim@yahoo.com

**Entry Deadline:** Online registration is preferred. Online registration must be completed by 11:59 PM PDT on Monday, July 16th.

**Age Groups: 18-24, 25-29, 30-34, etc. up to 95+.
Your competition age is the age you will be on December 31, 2018.**

**Relay Ages: 72-99, 100-119, 120-159, 160-199, 200-239, 240-279, 280-319, & 320-359.**

**Entry Limit: You may enter a maximum of 6 individual events with no more than 5 events per day plus unlimited relays. Enter relays at the meet.**

**All events will be seeded SLOW TO FAST.**

**Check-In Deadlines: The 400 IM, 1500 Freestyle, 800 Freestyle and 400 Freestyle will be deck seeded.**

**Friday: Check-in for the 400 IM will open at 1pm and will close at 1:30pm. Check-in for the 1500 Freestyle will open at 1pm and close at 2pm.
Saturday: Check-in for the 800 Freestyle will open at 10am and close at 10:30am.
Sunday: Check-in for the 400 Free will open at 8am and close at 8:30am.**

**Enter relays at the meet. Entry deadlines for relays will be announced at the meet.**

**Breaks:** There will be a short break after each set of relays and the 400 Free on Sunday

**Awards:** Northwest Zone ribbons will be awarded to first thru sixth places in individual events.

**Accommodations:**

Best Western Inn & Suites: (503) 491-9700
Best Western Pony Soldier: (503) 665-1591
Comfort Suites: (503) 661-2200
Days Inn & Suites: (503) 465-1515
Embassy Suites: (503) 460-3000
Four Points by Sheraton: (503) 491-1818
Hampton Inn: (503) 669-7000
Hawthorn Inn & Suites: (503) 492-4000
Holiday Inn Express: (503) 492-2900
Phoenix Inn: (503) 669-6500
Shilo Inn: (503) 907-1777
Sleep Inn: (503) 618-8400

ENTRY FORM AND WAIVER FOR MASTERS SWIMMERS

(2 Pages)

**Gil Young Memorial/NW Zone LCM Championship Meet
Dates: July 20-22, 2018**

Name

Address

City State Zip Code

Phone

USMS Number (Include Copy of USMS Registration Card w/Entry)

USMS Club (OREG, DUCK, HMS, PSM, BWAC, etc)

Birth Date Age Sex M F

**EVENTS**

|  |
| --- |
| **Friday** |
| 1 | 400 IM | \_\_\_:\_\_\_.\_\_\_ |
| 2 | 1500 Free | \_\_\_:\_\_\_.\_\_\_ |
| **Saturday** |
| 3 | 800 Free | \_\_\_:\_\_\_.\_\_\_ |
| Break |
| 4 | 50 Back | \_\_\_:\_\_\_.\_\_\_ |
| 5 | 200 Fly | \_\_\_:\_\_\_.\_\_\_ |
| 6 | 100 Free | \_\_\_:\_\_\_.\_\_\_ |
| 7-9 | Mixed Free Relays |
| Break |
| 10 | 50 Breast | \_\_\_:\_\_\_.\_\_\_ |
| 11 | 200 Back | \_\_\_:\_\_\_.\_\_\_ |
| 12 | 100 Fly | \_\_\_:\_\_\_.\_\_\_ |
| 13 | 200 IM | \_\_\_:\_\_\_.\_\_\_ |
| 14-17 | Medley Relays |  |

|  |
| --- |
| **Sunday** |
| 18 | 400 Free | \_\_\_:\_\_\_.\_\_\_ |
| Break |
| 19 | 50 Free | \_\_\_:\_\_\_.\_\_\_ |
| 20 | 200 Breast | \_\_\_:\_\_\_.\_\_\_ |
| 21 | 100 Back | \_\_\_:\_\_\_.\_\_\_ |
| 22-27 | Free Relays |
| Break |
| 28 | 50 Fly | \_\_\_:\_\_\_.\_\_\_ |
| 29 | 200 Free | \_\_\_:\_\_\_.\_\_\_ |
| 30 | 100 Breast | \_\_\_:\_\_\_.\_\_\_ |
| 31-32 | Mixed Medley Relays |
| Break |
|  |  |  |

Make checks payable to:

Oregon Masters Swimming.

Mail form and fee to:

OMS Data Manager, PO Box 1072, Camas, WA 98607-1072

 **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 |