



2018 FAIRBANKS MASTERS HOLIDAY SPLASH INVITE

DECEMBER 2



All entries shall be submitted on the attached entry form. Submit entries to Kristina Miller (swimfitalaska@yahoo.com) via hard copy or email attachment by **midnight Thursday, November 22, 2018.**

SANCTION	Under sanction # by USA Masters Swimming and Alaska Masters Swimming.	
LOCATION	UAF Patty Pool 410 Alatna Dr. Fairbanks, AK 99775	
FACILITY	Six (6) lane, 25 yard competition pool, divided by Flo-thru lane lines. CTS6 timing system with touch pads, CTS scoreboard, manual back-up watches, and horn/strobe light start. 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 106.2.1	
EVENT PERSONNEL	<p>Meet Referee: Denise Thorsen Email: dlthorsen@alaska.edu</p> <p>Meet Director: Josh Gregory Email: coachjosh@aksst.com</p> <p>Entry Chair: Kristina Miller Email: swimfitalaska@yahoo.com</p>	
SCHEDULE	General Warm Up	9:00-9:50am
	Official's Meeting	9:30am
	Coach's Meeting	9:50am
	Competition	10:00am
	PROJECTED TIMELINE: will be established and distributed by Friday, November 30, along with the heat/lane assignment report.	
FORMAT	<ul style="list-style-type: none"> • This meet will be conducted in SCY • All events are timed finals, pre-seeded with heats swum slowest to fastest • Mixed relays must consist of two males and two females • Lane six (6) will be open for continuous warm up/cool down (102.4) 	
RULES	This meet will be run according to USMS rules and regulations. No glass on deck at any time. No shaving allowed on site. Smoking or use of other tobacco products in not permitted before, during or after the meet within the facility of adjacent outdoor areas.	
ELIGIBILITY	<p>Open to all USMS registered swimmers who are at least 18 years of age by January 1, 2018.</p> <p>If a swimmer wishes to affiliate with a Masters Club, the club and swimmer must both be registered with the same Local Masters Swimming Committee (LMSC). If no affiliation is marked on entry form, the swimmer will be entered as "UN" (unattached).</p> <p>International entries must include a copy of the swimmer's Masters Swimming registration card.</p>	
ENTRY RULES	<p>ENTRIES MUST INCLUDE: Full legal name, age, USMS ID number, and signed liability waiver.</p> <p>AGE: Swimmer's age on the day of the meet determines age group for the competition.</p> <p>DECK ENTRIES: Deck entries will not be accepted.</p>	



ENTRY LIMITS	Four (4) individual events and one (1) relay event. Swimmers will not be guaranteed twenty minutes between events.
ENTRY DEADLINE AND SUBMISSION	ENTRY DEADLINE: Midnight on Thursday, November 22, 2018. Late entries will not be accepted. MEET ENTRY CHAIR: Kristina Miller Email: swimfitalaska@yahoo.com Phone: 907-388-8267
ADAPTIVE SWIMMERS	Disabled or adapted swimmers are welcome and encouraged to participate. Individuals should include a written description of the special needs of the disabled/adaptive swimmer with entries. Questions regarding final assignment within specified heats should be brought to the attention of the Meet Referee.
ENTRY FEES	INDIVIDUAL EVENT: \$4.00 ATHLETE SURCHARGE: \$5.00 Please make checks payable to: Stingray Swim Team Fees must be hand delivered to computer table on the day of the meet and must be paid in U.S. dollars by cash, check, or money order. Entry fees are non-refundable. Athlete surcharge also applies to relay-only swimmers.
SCRATCHES	Scratches shall be made at the Clerk of Course on the provided scratch sheet.
LIABILITY	It is understood and agreed that USMS and Stingray Swim Team shall be free from any liabilities or claims for damages arising by reason of injuries to anyone during the conduct of the event.
SCORING	INDIVIDUAL: 7-5-4-3-2-1 RELAY: 14-10-8-6-4-2
AWARDS	None
CONCESSIONS	A concession stand will not be offered
MEET PROGRAMS AND RESULTS	Heat sheet will be available at the beginning of warm ups. Live results will be available on Meet Mobile. Final results will be posted on Stingray Swim Team website (stingrayswim.org).
DECK CHANGING	Deck Changes are prohibited.
RECORDING BAN	Use of audio or visual recording devices, including a cell phone, is not permitted in changing areas, rest rooms or locker rooms. Visual recording devices are not permitted behind the blocks during the start sequence throughout the meet.
DRONES	Operation of a drone, or any other flying apparatus, is prohibited over the venue (pools, athlete/coach areas, spectator areas and open-ceiling locker rooms) any time athletes, coaches, officials, and/or spectators are present.



ORDER OF EVENTS

WOMEN	EVENT	MEN
1	100 BREAST	2
3	200 FREE	4
5	50 BACK	6
7	100 FLY	8
9	50 BREAST	10
11	200 IM	12
13	50 FREE	14
15	100 BACK	16
17	50 FLY	18
19	100 FREE	20
21	MIXED 200 FREE RELAY*	21
23	500 FREE	24

*Mixed 200 Free Relay must consist of two (2) females and two (2) males



**APPENDIX A
MEET ENTRIES AND LIABILITY WAIVER**

Athlete Name _____

Athlete Age _____

USMS ID# _____

LMSC _____

Workout Group _____

Entries: (Max four (4) individual and one (1) relay event.)

EVENT #	EVENT	TIME (can be estimate)

Liability Waiver:

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS. (Rule book article 204.1)

Athlete Signature _____ Date _____



APPENDIX A
MEET ENTRIES AND LIABILITY WAIVER *EXAMPLE*

Athlete Name John Doe

Athlete Age 52

USMS ID# 566Y-0AC7S

LMSC Alaska Masters

Workout Group Stingray Swim Team

Entries: (Max four (4) individual and one (1) relay event.)

EVENT #	EVENT	TIME (can be estimate)
4	200 FREE	2:10.78
8	100 FLY	59.42
14	50 FREE	26.18
16	100 BACK	1:03.45
21	MIXED 200 FREE RELAY	26.18 SPLIT

Liability Waiver:

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS. (Rule book article 204.1)

Athlete Signature John Doe Date 10/21/16

