# The 2020 FFH Masters Spring Meet

# April 26, 2020

**Hosted by: Fox Chapel Killer Whales/Flying Fish Heads**

**Sanctioned by the Allegheny Mountain LMSC for USMS, Inc.**

**TYPE OF MEET:** 25-yard timed finals.

**DATE & TIME:** Sunday, April 26, 2020

Warm-up: 8:00 am

Meet Start: 9:30 am

**FACILITY:** Fox Chapel High School, 611 Field Club Road, Pittsburgh, PA 15238. Eight-lane, 25-yard pool. 3-1/2’ to 12’ deep. Six lanes will be used for the meet and one lane will be available for warmup during the meet.

**POOL LENGTH CERTIFICATION:** 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.

**TIMING SYSTEM:** Daktronics timing system with scoreboard and one stopwatch per lane as backup. The primary timing system will be automatic timing. Times may be submitted for USMS records and USMS Top 10 consideration.

**ELIGIBILITY:** Current USMS rules will govern the meet. All participants must be age 18 or older on the day of the meet, and be currently-registered members of U.S. Masters Swimming. Foreign swimmers must provide proof of current membership in their

country’s Masters Swimming governing body.

**ENTRY FEES:** Individual events: $7.00 each event. Relays: $12.00 per relay.

**ENTRY LIMITS:** Five (5) individual events, plus relays. No limit to the number of relays entered – indicate as “A”, “B”, “C”, etc. Swimmers over-entered will be removed from their last event.

**CHECK-IN:** Swimmers are considered checked in for all individual events.

**SEEDING:** Times will be seeded Short Course Yards. No conversions by meet management. Please enter times for SCY.

**SCRATCHES:** No penalty for scratching on the block.

**RELAY ENTRIES:** Entries for relays will be due the morning of the session. Entry deadlines will be announced during warm-up sessions. Entries will be due by 8:30 am during warm-ups. Relays will be seeded after the deck entry deadline. For a relay to count toward USMS Top 10 times, no swimmer can swim more than one leg of a relay. Mixed relays must be two men and two women. All swimmers must be registered with the same club/team.

**SCORING:** Individual: 9-7-6-5-4-3-2-1. Relays are double points.

**AWARDS:** Ribbons 1st through 3rd places.

**INFORMATION:** Official website: [www.flyingfishheads.org](http://www.flyingfishheads.org) or kwswimming.com

**ENTRY DEADLINE**: All individual entries sent via USPS must be received by April 20, 2020, at 5:00pm. **Email deadline** is Friday April 24, 2020, at midnight. Yes! Deck entries will be accepted. Make checks payable to “KW Swimming.” The liability release must be signed without alterations.

**MEET DIRECTOR:** Libby Ernharth libbyernharth@gmail.com

**EMAILED ENTRIES:** Entries may be emailed to Libby Ernharth along with a copy of your USMS membership card.

# The 2020 FFH Masters Spring Meet ~ April 26, 2020 ~ Entry Form

Name: \_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_\_\_\_\_\_ Current USMS \_\_\_\_\_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_ Age on 3/2/2019: \_\_\_\_\_\_\_\_\_ USMS Club: \_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_

**Enter your seed times or “NT” (No Time) for your events.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **#** | **Event** | **Seed Time** |  | **#** | **Event** | **Seed Time** |
| 1-2 | 200 Mixed Medley Relay |  |  | 17-18 | 100 Individual Medley |  |
| 3-4 | 200 Freestyle |  |  | 19-20 | 500 Freestyle |  |
| 5-6 | 100 Breaststroke |  |  | 21-22 | 200 Mixed Free Relay |  |
| 7-8 | 50 Freestyle |  |  | 23-24 | 100 Backstroke |  |
|  | 10-minute break |  |  |  | 10-minute break |  |
| 9-10 | 50 Backstroke |  |  | 25-26 | 50 Butterfly |  |
| 11-12 | 100 Butterfly |  |  | 27-28 | 200 Individual Medley |  |
| 13-14 | 50 Breaststroke |  |  | 29-30 | 150 Swim with Gear (choice) |  |
| 15-16 | 100 Freestyle |  |  |  |  |  |
|  | 10-minute break |  |  |  |  |  |

Read the information sheet carefully. Make your check payable as shown below and mail it to the address shown there. All Masters swimmers may be asked to show their USMS cards, if requested, at the meet. Incomplete entries (no fee, no copy of USMS card, incomplete entry card) or late entries (postmarked/received after the deadline) MAY BE REJECTED!

**YOU MUST SIGN THE USMS LIABILITY WAIVER ON THE NEXT PAGE AND MAIL IT WITH THIS ENTRY FORM!**

|  |  |  |  |
| --- | --- | --- | --- |
| **MEET FEES:** |  |  | **MAIL CHECKS TO:** |
| **# Indiv Events (x $7.00)** | **$** |  | **KW Swimming** |
| **# Relays ( x $12.00)** | **$** |  | **120 Crofton Drive** |
| **Event 29-30 FREE** |  |  | **Pittsburgh, PA 15238** |
|  |  |  |  |
| **TOTAL ENCLOSED** | **$** |  | **MAKE CHECKS PAYABLE TO: “KW Swimming”** |

**OR EMAIL ENTRY AND COPY OF USMS CARD TO:** libbyernharth@gmail.com

**YOU MUST SIGN AND INCLUDE THE WAIVER ON THE FOLLOWING PAGE**

**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.

6. 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 | |

***Revised 07/01/2014***