**Georgia Masters Swimming**

**Rockdale County Short Course Yards Developmental Meet**

**Sunday, August 23, 2020**

**Sanction No. -**

Held Under the Sanction/Approval of USMS, Inc. & Georgia LMSC

**Time:** Sunday--Warm ups at 9:00 a.m. Meet begins at 9:30 a.m.

**Location:** The Rockdale County pool is an 8 lane, 25 yd facility in Conyers (indoors). Directions are as follows:  Take I-20 EAST from 285. Go to Exit 82. Turn RIGHT on Hwy 139/ Ga 138. Turn RIGHT on Ebeneezer Rd and go to 1781 (Johnson Park).   
Address: 1781 Ebeneezer Rd    Conyers, GA   30094  
Facility phone: 770/278-7529

**This is a Category I Meet. Times will not count for Top Ten or Records.**

**Eligibility:** The meet is open to all persons 18 years and older as of August 23, 2020. USMS REGISTRATION IS

REQUIRED. If you are not registered, your application can be accepted at the meet. Be sure to

include a copy of your USMS card with your entry.

**Events:** Swimmers may enter up to five events.

**Awards:** Ribbons will be awarded for 1st, 2nd, and 3rd places.

**Timing:** Hand-held stop watches will be used. Note: This is a Category I developmental meet – times will

not count for Top Ten or Records.

**Fees:** $18.00 for up to 5 events; $2.00 surcharge for deck and late entries (received after August 21);

$1.00 surcharge for entries without 3 x 5 index cards. Make checks payable to **Lisa Watson**.

Mail to:

Lisa Watson

804 Howell Court

Duluth, Georgia 30096 Phone #: (770) 497-1901

[lisa.watson@ung.edu](mailto:lisa.watson@ung.edu)

**Entries:** Indicate events desired on the entry form--circle event # and provide seed time; use NT for No Time. Please fill out a 3 x 5 index card for each event entered. Include name, age, sex, event number/name, and seed time. EXAMPLE:

|  |
| --- |
| Bob Kohmescher 72  Event #: 6 1:48  100 yard breast  (leave room for timers) |

**Seeding:** Entries received by August 21 will be seeded. Women's heats will precede men's heats. Sexes may be combined for some heats. NTs will be placed in slower heats, except for the 500 free, which is fast to slow.

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**ENTRY FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Sex** | **Age** | **DOB** |
| **Address** | | **Cell/home phone** | |
| **City** | | **State** | **Zip** |
| **USMS** | | **Team** | |
| **E-mail** | | | |

**SEED TIME EVENT SEED TIME EVENT**

|  |  |  |  |
| --- | --- | --- | --- |
|  | 1 500 yrd Free/400 Individual Medley. |  | 9. 200 yrd Individual Medley |
|  | 2. 50 yrd Breastsroke |  | 10. 50 yrd Butterfly |
|  | 3. 100 yrd Backstroke |  | 11. 100 yrd Freestyle |
|  | 4. 200 yrd Butterfly |  | 12. 200 yrd Breastroke |
|  | 5. 50 yrd Freestyle |  | 13. 50 yrd Backstroke |
|  | 6. 100 yrd Breastroke |  | 14. 100 Butterfly |
|  | 7. 200 yrd Backstroke |  | 15. 100 yrd Individual Medley |
|  | 8. 25 yrd Choice |  | 16. 200 yrd Freestyle |
|  | MEDLEY RELAYS |  | FREESTYLE RELAYS |

**Circle event number and indicate seed time if known**

**Fees** (Make checks payable to **Lisa Watson**)

|  |  |
| --- | --- |
| **ALL EVENTS** | $18.00 |
| **SURCHARGE – Late and Deck Entries $2.00** |  |
| **SURCHARGE- Did not use 3x5 cards $2.00** |  |
| **TOTAL AMOUNT ENCLOSED** |  |

|  |  |
| --- | --- |
| http://www.usms.org/logos/USMS_Logo_Horz_tm_200x38.jpg | **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 | |

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