



Minnesota Masters Swimming LCM State Championship Meet

Sunday, July 28, 2019

Jean K. Freeman Aquatic Center

University of Minnesota

1910 University Ave SE, Minneapolis 55455

Schedule: Registration – 9:00AM - 9:30AM
Warmup Period – 9:00AM - 9:50AM
Events – 10:00AM - 2:00PM (approximately)

Meet Sanction: 309-S004

Meet Director: Shannon Swartz (shannonswartz@comcast.net)

Entry Changes: David Bergquist (david.bergquist@minnesotamasters.com)

Entry Information: Must be a USMS registered member or pay the special “One-Event” fee.

Entry Type	Early Bird	Normal Rate*	Day of Meet**
Deadline	July 11, 11:59 PM	July 25, 11:59 PM	July 28, 9:30 AM
USMS Member	\$20	\$30	\$40
One-Event	\$45	\$50	N/A

*In order to prepare event seeding and psych sheets, registration is suspended from this date and time until the day of the meet.

** A swimmer may pay the annual USMS registration fee of \$56 and enter on the day of the meet for a total fee of \$96. No one-event registrations are available on the day of the meet.

Registration: Participants may enter a maximum of 6 individual events. Entry fees are non-refundable. Online entries are paid by credit card to ClubAssistant.com Events. Deck entries on the day of the meet are limited to new or existing USMS members. Deck entries to be paid by check or cash only. No credit cards on day of meet.

Course: 8 lane, 50-meter pool, using 8 lanes for competition. Additional lanes in diving well will be available throughout the meet for warm-up and cool down. The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1, but as a bulkhead course is subject to length confirmation.

Positive Check-in: Positive check-in is required for the 400 free, 800 free, and 1,500 free. Check-in times will be announced at the meet. Swimmers who do not check-in at the registration table will be scratched from the event.

Relays: Relay entries will be accepted up until 10 minutes prior to the respective relay. All relays teams must either e-mail their information to david.bergquist@minnesotamasters.com by 11:59 PM on Thursday, July 25th or complete a relay entry card at the Meet complete with first and last name, age and gender of each swimmer. Each card or e-mail must include the club/workout group name. For the relay to be official, none of the four members may be “unattached,” all must be registered with the same club but may be from different workout groups. The distance and type of relay must be circled or otherwise indicated. Participants may only compete once in each relay. Women’s, Men’s, and Mixed relay heats may be combined depending on entries.

Results: Will be posted at the meet and online at www.minnesotamasters.com within one week. Times swum by non-USMS Members are not eligible for USMS Top 10 or records consideration. (Article 201.1.3B). Times swum by non-Minnesota LMSC members are not eligible for Minnesota LMSC records.

Scoring: The winning team will be the Minnesota LMSC based Club or Workout Group who has the most cumulative points at the end of the meet. Athletes & Relays will score points for their respective USMS Clubs and workout groups. Points will be awarded as follows; for Individuals: 9,7,6,5,4,3,2,1; Relays: 18,14,12,10,8,6,4,2. Note: all 4 members of the relay must belong to the same Workout Group for that Workout Group to receive any points. Club MINN Athletes & Relays will not score points towards overall team totals, but workout groups under Club MINN will.

Paper Entry (2 pages)

Event Number			Event	Entry Time	Event Number			Event	Entry Time
Group 1					Group 4			Short Break	
1	2	3	200m Free Relay W/M/X		21	22	23	200m Medley Relay W/M/X	
4			200m Back	__ : __. __	24			100m Breast	__ : __. __
5			100m Free	__ : __. __	25			200m Butterfly	__ : __. __
6			50m Breast	__ : __. __	26			50m Free	__ : __. __
7			100m Fly	__ : __. __	27			200m I.M.	__ : __. __
Group 2			Short Break		Group 5			Short Break	
8	9	10	400m Medley Relay W/M/X		28	29	30	800m Free Relay W/M/X	
11			400m Free	__ : __. __	31			800m Free	__ : __. __
12			100m Back	__ : __. __	32			1500m Free	__ : __. __
13			200m Breast	__ : __. __					
Group 3			Short Break						
14	15	16	400m Free Relay W/M/X						
17			400m I.M.	__ : __. __					
18			50m Fly	__ : __. __					
19			200m Free	__ : __. __					
20			50m Back	__ : __. __					

Relays that are grouped together may be combined into single heats depending on number of entries.

Paper Entry (USMS members only), mail

- (a) This page and the following Waiver page
- (b) A check for the correct amount made payable to Minnesota Masters
- (c) A copy of your USMS card

To:
David Bergquist c/o Recruit Masters
Suite 300, 8200 Humboldt Ave. So.
Bloomington, MN 55431

PLEASE PRINT

Print Name: _____ Male Female
 Birthdate: ___/___/___ Age: ___ Phone: ___-___-___
 USMS #: ___-___ Club: _____ Workout Group: _____
 Email Address: _____

Signature required on following page (please mail both pages and funds with your registration)





**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	