



Minnesota Masters Swimming SCM State Championship Meet

Sunday, November 24, 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 - 3:30PM approximately (end times can vary greatly)

Meet Sanction: 309-S007

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.
New members can register at usms.org prior to the meet and register at below reduced rates.

Entry Type	Early Bird	Normal Rate	Day of Meet*
Deadline	November 7, 11:59 PM	November 21, 11:59 PM	November 24, 9:30 AM
USMS Member	\$20	\$30	\$45
One-Event	\$55	\$60	N/A

* A swimmer may pay the 2020 USMS registration fee of \$60 and enter on the day of the meet for a total fee of \$105. No one-event registrations are available on the day of the meet.

We strongly encourage all swimmers to pre-register with USMS and pre-register for the meet prior to the Normal Rate deadline.

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, 25 meter pool, using 8 lanes for competition. 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. Eligibility of times for USMS Top 10 and records will be contingent on verification of bulkhead placement.

Positive Check-in: ***All Swimmers must check-in by 9:45 at the registration desk.*** In order to reduce the number of open lanes and thus reduce the length of the meet, all swimmers are required to positively check-in. Positive check-in is also required for all Group 4 and Group 5 individual events (200 Breast, 100 Fly, 50 Free, 200 IM, 800 Free, and 1500 Free). Positive check-in for these events will be made available after the conclusion of Group 2 (100 Breast). Check-in deadline times for these events will be announced at the meet. Swimmers who do not positive check-in at the registration table for these events will be scratched from the event.

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. Times swum by One-Event swimmers are not eligible for USMS Top 10 or records consideration, and are also not eligible for Minnesota LMSC records.

Relays: Relay entries will be accepted up until 20 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, November 21st or submit 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,” or One-Event swimmers. All relay members 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.

Seeding: Event seeding for Event Groups 1, 2 and 3 will be generated after the 9:45 Positive Check-in deadline for all swimmers. Event seeding for Event Groups 4 and 5 will be generated after the to be announced Positive Check-in deadline for those events following the completion of Event Group 2. Please see the following page for the listing of Event Groups.

Order of Events and Paper Entry: Please see the following page for order of events along with the process to submit a paper entry.



Paper Entry (2 pages)

Event Number	Event	Entry Time
Event Group 1		
1/2/3	400m Medley Relay W/M/X	
4	100m Free	__ : __. __
5	200m Back	__ : __. __
6	50m Breast	__ : __. __
7	200m Fly	__ : __. __
Event Group 2 (Short Break)		
8/9/10	200m Free Relay W/M/X	
11	100m IM	__ : __. __
12	400m Free	__ : __. __
13	50m Back	__ : __. __
14	100m Breast	__ : __. __
		

Event Number	Event	Entry Time
Event Group 3 (Short Break)		
15/16/17	200m Medley Relay W/M/X	
18	50m Fly	__ : __. __
19	200m Free	__ : __. __
20	400m IM	__ : __. __
21	100m Back	__ : __. __
Event Group 4 (Short Break)		
22/23/24	400m Free Relay W/M/X	
25	200m Breast	__ : __. __
26	100m Fly	__ : __. __
27	50m Free	__ : __. __
28	200m IM	__ : __. __
Event Group 5 (Short Break)		
29/30/31	800m Free Relay W/M/X	
32	800m Free	__ : __. __
33	1500m Free	__ : __. __

**Relays that are grouped together may be combined into single heats depending on number of entries.
 A swimmer may enter either the 800 Free or 1500 Free but not both.
 Heats for the 800 and 1500 Free will be seeded fast to slow.**

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 Swimming
- (c) A copy of your USMS card
- (d) Paper entries must be received by the Normal Rate Deadline. The Swim Meet Committee takes no responsibility for lost or late mail.

Mail 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");

- 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.
- 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.
- 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.
- 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.
- 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	