

# SLO CLASSIC MASTERS SHORT COURSE YARDS SWIM MEET

Friday, November 21 - Sunday, November 23, 2014

**Sanction:** 334-S045 Sanctioned for Southern Pacific Masters for USMS, Inc.

**Location:** Sinsheimer Pool, 900 Southwood Drive, San Luis Obispo, CA 93401. Outdoor 50 meter x 25 yard, 8-lane course with eight deep water lanes for competition and nine lanes for warm-up/warm-down. Two separate courses with warm-up/warm-down lanes available may be used if needed.

**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 107.2.1.**

**Directions:** From North or South US 101, take Marsh St. off ramp. Turn right on Broad St. (3rd stoplight), turn left on Orcutt Rd.(4th stoplight). Cross railroad tracks, then take 1st left onto Laurel Lane and left onto Southwood Dr (1st stop sign). Swim Center is one block at end of road.

**Entries:** Fill out an SPMA Consolidated Entry Card (below). The pre-entry postmark deadline is Wednesday, November 12<sup>th</sup>.

**Deck entries:** Friday, November 21<sup>st</sup> deck entries will close at 4:00 p.m.; Saturday, Nov 22<sup>nd</sup> deck entries will close at 11:00 a.m.; Sunday, Nov 23<sup>rd</sup> deck entries will close at 9:00 a.m. Age on November 23<sup>rd</sup> determines age group for the meet. **This is a Short Course YARDS Meet! Adjust entry times accordingly.**

**Seeding:** All events will be deck seeded fast to slow by entered time, all ages combined. Women's & Men's events may be combined.

**Check-in:** Check-in for all events will be required. For Friday's events you must check-in by 4:30 pm on Friday. For Saturday's events you must check-in by 11:30 a.m. on Saturday. For Sunday's events you must check-in by 9:30 a.m. on Sunday.

**Relays:** There will be no relays for this meet.

**Awards:** Individual: Ribbons for places 1 to 3.

**Entry Fees:** \$25.00 per swimmer flat fee if you enter by the postmark deadline of Nov 12<sup>th</sup>. Deck entries allowed for a total of \$35.00.

**Checks payable to:** SLOSC **Mailing Address:** Mail entry card, a copy of your USMS card, and check to: SLO Gobbler, PO Box 142, San Luis Obispo, CA 93406.

**Questions:** Meet Director, Philip Yoshida, (805) 543-9515 or [office@sloswimclub.org](mailto:office@sloswimclub.org). Meet info is also available at [www.smpa.net](http://www.smpa.net).

**PLEASE NOTE:** This is a combined USA Masters and USA Swimming Competition.

## FRIDAY, November 21, 2014

Warm-up: 4:00 PM, Start: 5:00 PM

Event # (W/M)	Event
3/4	200 Freestyle
7/8	1650 Freestyle

## SATURDAY, November 22, 2014

Warm-up: 10:00 AM, Start: 30 min after conclusion of the novice session. no sooner than 12:00PM

Event # (W/M)	Event
33/34	100 Butterfly
37/38	50 Breaststroke
43/44	100 Freestyle
47/48	50 Backstroke
53/54	200 Individual Medley
59/60	400 Individual Medley

## SUNDAY, November 23, 2014

Warm-up: 9:00 AM, Start: 10:00 AM

Event # (W/M)	Event
63/64	100 Backstroke
67/68	100 Individual Medley
73/74	50 Butterfly
79/80	100 Breaststroke
83/84	50 Freestyle
91/92	500 Freestyle

**Entry Card (Below) – Mail to SLO Swim Club (address above) – Postmarked Entry Deadline is Wed, Nov. 12<sup>th</sup>.**

### SOUTHERN PACIFIC MASTERS ASSOCIATION • CONSOLIDATED ENTRY CARD

Name \_\_\_\_\_ Male  Female  USMS # \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Club \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Event No.	FREESTYLE (Submitted Time)	Event No.	BACKSTROKE (Submitted Time)	Event No.	BREASTSTROKE (Submitted Time)	Event No.	BUTTERFLY (Submitted Time)	Event No.	INDIV. MEDLEY (Submitted Time)
	50 . .		50 . .		50 . .		50 . .		100 . .
	100 . .		100 . .		100 . .		100 . .		200 . .
	200 . .		200 . .		200 . .		200 . .		400 . .
	400/500 . .								
	800/1000 . .								
	1500/1650 . .								

Meet \_\_\_\_\_

No. of events \_\_\_\_\_ × \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Surcharge \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

FOR OFFICE USE ONLY

Amt Rec'd \_\_\_\_\_

Date \_\_\_\_\_

Include a copy of USMS card

Maximum 5 individual events per day

Include a copy of USMS card

Late or incomplete entries (no fee, incomplete entry card, incomplete entry data) or entries postmarked after due date **MAY BE REJECTED!**

**ALL MASTERS** swimmers are required to send a photo-copy of their USMS card with their entry card. ALL Masters swimmers may be asked to show their USMS card if requested at the meet.

**PLEASE SIGN:** \_\_\_\_\_ **DATE** \_\_\_\_\_

Is this your first Masters Meet?  Yes  No

Read the meet information sheet carefully. Make your check payable as shown on the meet information sheet and mail it to the address shown.

Non-SPMA swimmers please include your address:

Street: \_\_\_\_\_

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



## 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	