

# **Beckett Ridge Aquatic and Tennis**

## **Short Course Master's Swim Meet**

Saturday, August 29, 2009  
Hosted by East Butler County YMCA for  
USMS, Inc. Sanction Number : 242-009

**Facility/Location:** Beckett Ridge Aquatic and Tennis Club is located in West Chester, Ohio in the northern suburbs of Cincinnati with easy access from I-75. There is shopping, entertainment, lodging and dining at Union Center Blvd. and the Streets of West Chester. The pool is an eight lane competition pool with Colorado Timing system and electronic scoreboard for all eight lanes. In addition there is a separate pool that can be used for warm up and warm down. Parking is spacious and free. Concessions are available on site.

**Meet Conduct:** 2009 USMS Rules will govern conduct of this short course meters meet.

**Starting Times:** Warm ups start at 7:30 AM and end at 9:00 AM EDT. Sprint lanes will be available at 9:00 AM. Competition starts at 9:30 AM.

**Eligibility:** All swimmers must be registered with USMS and copies are to be sent with entries. Registration for USMS will be available on the day of the meet at the deck entry area at the pool.

**Age Groups:** Individual Events: 19-24, 25-29, 30-34, 35-39, etc. in 5 year increments. Relay Events: 72-99, 100-119, 120-159, 160-199, etc in 40 year increments. Swimmers age is determined as of 12/31/2009.

**Seeding:** All events are timed finals. Swimmers will be seeded on basis of submitted times, regardless of age or sex. Entrants submitting "no time or NT" may be placed in the slowest heat for that event. All heats will be swum from slowest to fastest. Heat sheets will be posted around the pool area.

**Entry Fee:** \$25 for up to 5 individual events if received by August 25, 2009. After that date the cost is \$30. Make checks payable to Beckett Ridge Aquatic and Tennis. Mail to: Patrick Nunan, 5840 Winged Foot Drive, West Chester, Ohio 45069. Relays are \$2 per event or \$5 for 3 events or \$6 for all 4 events. Relay lineups need to be turned in by 9:15 AM on race day.

**Deck Entries:** Saturday, August 29, 2009 from 7:15 AM until 9:15 AM.

**Awards:** Ribbons will be given for places 1<sup>st</sup> through 6<sup>th</sup> in individual races. Special prizes for relay winners.

## CIRCLE YOUR EVENT NUMBER AND INDICATE SEED TIME

**Saturday, August 29, 2008: Warm up starts at 7:30 AM; meet starts at 9:30 AM EDT**

Women	Men	Events: Short Course Meters	Seed Time
1	2	400 Medley Relay (deck enter only)	Min. _____ Sec. _____
3	4	200 Free	Min. _____ Sec. _____
5	6	50 Back	Min. _____ Sec. _____
7	8	100 Fly	Min. _____ Sec. _____
9	10	200 Breast	Min. _____ Sec. _____
11	12	200 Free Relay (deck enter only)	Min. _____ Sec. _____
<b>TEN MINUTE BREAK</b>			
13	14	400 IM	Min. _____ Sec. _____
15	16	50 Free	Min. _____ Sec. _____
17	18	200 Back	Min. _____ Sec. _____
19	20	50 Fly	Min. _____ Sec. _____
21	22	400 Free Relay (deck enter only)	Min. _____ Sec. _____
23	24	200 IM	Min. _____ Sec. _____
25	26	100 Back	Min. _____ Sec. _____
27	28	200 Fly	Min. _____ Sec. _____
29	30	100 Breast	Min. _____ Sec. _____
<b>TEN MINUTE BREAK</b>			
31	32	100 IM	Min. _____ Sec. _____
33	34	100 Free	Min. _____ Sec. _____
35	36	50 Breast	Min. _____ Sec. _____
37	38	200 Medley Relay ( deck entry only)	Min. _____ Sec. _____
39	40	400 Free	Min. _____ Sec. _____

**\$25 Entry Fee for up to 5 individual events ( received by 8/25/2009)**

**\$30 Entry Fee for up to 5 individual events (received after 8/25/2009 or deck entry)**

Name: (First, Last) \_\_\_\_\_ 2009 USMS# \_\_\_\_\_ (attach copy)  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Gender: M F (circle one) Date of birth: \_\_\_\_\_  
 Age as of Dec. 31, 2009 \_\_\_\_\_ Team: \_\_\_\_\_

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent to Masters Swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of the USMS.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**CHECKS PAYABLE TO: BECKETT RIDGE AQUATIC AND TENNIS CLUB.**

**Mail entries, fees to : Patrick Nunan, 5840 Winged Foot Drive, West Chester, Ohio 45069 Cell: 513-417-2492 E-Mail: [PJNDPMRUN@aol.com](mailto:PJNDPMRUN@aol.com).**

**FEEL FREE TO BRING YOUR FAMILY AND MAKE IT A DAY AT OUR WONDERFUL FACILITY.**

**Meet Director: Patrick Nunan**