

University of Cincinnati
Masters Swimming &
Southwest Ohio Masters
Present:

The State of Ohio
Masters Championship
Swim Meet

**The University of Cincinnati
Campus Recreation Center
Cincinnati, Ohio**

SATURDAY, April 3rd, 2010

Deck Entries 10 – 11:00 am
WARM UPS BEGIN at 10:30 am

SEE ATTACHED INFORMATION

**The State of Ohio Masters Championship Swim Meet
Short Course Yards**

Saturday, April 3rd, 2010

Sanctioned by Ohio LMSC and USMS, Inc. Sanction Number: 247-012

HOST TEAM: University of Cincinnati Masters Swimming

**MEET DIRECTOR
& CONTACT:** Alan Wight, University of Cincinnati Masters Coach
513-543-7315
rawight11@yahoo.com

LOCATION: University of Cincinnati Campus Recreation Center
2820 Bearcat Way
Cincinnati, Ohio 45221-0017
Member Services Desk: 513-556-0604
www.uc.edu/reccenter/

ELIGIBILITY:

- Open to all swimmers who are registered with USMS. Each swimmer is responsible for his/her USMS card and will be required to show it upon request by officials.
- **To enter the meet, a copy of the swimmers current USMS registration card MUST accompany the entry form.**
- The meet entry form should display your registered name, number, and team name, according to your USMS card. Unattached swimmers note "UNAT." **Please print all information legibly.**
- If a swimmer is not currently registered with USMS, applications and registration fees will be taken at the meet. Only checks made out to Ohio LMSC will be accepted for USMS registration. A self-addressed stamped envelope is required for USMS registration so that cards may be mailed out after the meet.
- Swimmers and coaches *only* will be allowed on deck. Family members must remain in the viewing gallery.

AGE: The age reported on your entry form must reflect your age as of 4/3/2010.

ENTRY FEES & PAYMENT:

- A fee of \$30 will be charged for those that enter via the attached entry form and covers up to 5 individual events and 2 relays per person. *NOTE* All individuals, regardless of entry method, must sign the **waivers** at the bottom of the entry form.
- A flat fee of \$40 will be charged for deck entries. Deck entries will be accepted from 10 - 11:00 am on 4/3/2010.
- Refunds will only be issued for documented medical reasons or if the meet is cancelled.
- **Please make checks out to SWOM.**
- **Mail entries must be post marked by Tuesday, 3/30/2010.**
- Registration form, copy of USMS card, UC Waiver, and payment should be submitted by mail to:

Mail Payment to: Alan Wight
1106 Cross Lane # 1
Cincinnati, Ohio 45206

**SEEDING & LANE
ASSIGNMENTS:**

Each event will be seeded by the pre-entered seedtime of each swimmer, with the slower heats first (except the 500, which will be swum fastest to slowest). The meet will be deck seeded according to times submitted, regardless of age and gender. No time (NT) will be seeded in the slower heats. Swimmers are responsible to report to the blocks on time for their appropriate heat and lane for each event. Heat and lane assignments for all events will be posted by 11:30 am on the day of competition.

**STARTING
PROCÉDURE:**

103.8.5—Start Commands

A. At the commencement of each heat, the referee shall signal to the swimmers by a short series of whistles to remove all clothing except for swimwear, followed by a long whistle indicating that they should take their positions with at least one foot at the front of the starting platform, the edge of the pool or on the wall and remain there. In backstroke and medley relay events, at the referee's first long whistle the swimmers shall immediately enter the water and at the second long whistle shall return without undue delay to the starting position (article 101.1.2).

B. When the swimmers and officials are ready, the referee shall signal with an outstretched arm to the starter that the swimmers are under the starter's control.

C. On the starter's command "Take your mark," the swimmers shall immediately assume their starting position with at least one foot at the front of the starting platform. Swimmers starting in the water must have at least one hand in contact with the wall or starting platform. When all swimmers are stationary, the starter shall give the starting signal.

D. For backstroke event starts, the starter may give the command "Place your feet" after the referee's whistle.

RELAYS:

All relays are deck entered. Mixed relays may be swum, but not scored, and shall consist of two men and two women, who may swim in any order. Age groups for relays will be determined by the youngest member of the team and are: 19+, 25+, 35+, 45+, etc.

Official relay cards are to be picked up from the Clerk of Course by a team representative who is responsible for the relay. The relay representative should **print legibly** all information required. Each card should include the swimmer's name as on the USMS registration card in order of relay swum; first name, last name, age and gender. **Relay Cards shall be returned to the computer table by 11:15 on 4/3/2010.**

AWARDS:

- Individual and relay awards will be given for first through third place by gender and age group for 19+, 25+.... through 100+.

PARKING:

Parking is available on the streets around campus and in several garages. Some street parking is metered. I suggest parking in the Woodside Garage, just off of Martin Luther King Drive. It will cost \$5 for the entire day. Please see the appended map.

ORDER OF EVENTS: The meet will be deck seeded according to times submitted, regardless of age and gender. Heat and lane assignments for all events will be posted by 11:30 am on the day of competition.

Deck Entries: 10:00 am -11:00 am
Deck entry deadline: 11:00 am on 4/3/2010
Relay entry deadline: 11:15 am on 4/3/2010

Warm –Ups: 10:30 – 11:30 am

Heat Sheet Posted: 11:30 am (*Participants check for accuracy at this time*)

Events: 11: 40 am - 6:00pm

- | | |
|--------------------------|---|
| 1. 200 Medley Relay | 10. 200 Fly |
| 2. 400 Individual Medley | 11. 50 Freestyle |
| 3. 50 Backstroke | 12. 200 Individual Medley |
| 4. 200 Freestyle | 13. 100 Backstroke |
| 5. 50 Breaststroke | 14. 50 Butterfly |
| 6. 100 Butterfly | 15. 100 Breaststroke |
| 7. 200 Backstroke | 16. 100 Freestyle |
| 8. 100 Individual Medley | 17. 200 Freestyle Relay |
| 9. 200 Breaststroke | 18. 500 Freestyle (swum fastest to slowest) |

**WARM-UP &
COOL-DOWN:**

Entry into the pool must be feet first in a cautious manner with one hand in contact with the deck. Diving shall be permitted only from the blocks in the designated sprint lanes during warm-up. Warm-up and cool-down lanes will be provided during the competition. No diving will be permitted in these lanes. Instructions given by an official or University of Cincinnati Aquatic staff members must be obeyed at all times. A swimmer may be disqualified at the discretion of the Meet Director or Meet Official for failure to comply with these rules.

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PRINT LEGIBLY OR TYPE

NAME _____ GENDER _____

BIRTHDATE _____ AGE ON 4/3/2010 _____

USMS Number _____ TEAM _____

ADDRESS _____

CITY, STATE _____ ZIP _____

HOME PHONE (____) _____ BUSINESS PHONE (____) _____

E-MAIL _____

Please make Checks Payable to SWOM

ATTACH A COPY OF CURRENT USMS CARD.

Circle the event numbers in which you would like to be entered and show your seedtime to the hundredth of a second. If you do not enter a time you will be entered "NT."

EVENT #	SEED TIME	EVENT	EVENT #	SEED TIME	EVENT
1.	_____	200 Medley Relay	10.	_____	200 Fly
2.	_____	400 Individual Medley	11.	_____	50 Freestyle
3.	_____	50 Backstroke	12.	_____	200 Individual Medley
4.	_____	200 Freestyle	13.	_____	100 Backstroke
5.	_____	50 Breaststroke	14.	_____	50 Butterfly
6.	_____	100 Butterfly	15.	_____	100 Breaststroke
7.	_____	200 Backstroke	16.	_____	100 Freestyle
8.	_____	100 Individual Medley	17.	_____	200 Freestyle Relay
9.	_____	200 Breaststroke	18.	_____	500 Freestyle
					(swum fastest to slowest)

ADVANCE ENTRIES (postmarked by 3/30/10): \$30 per swimmer for meet including relays (paper entry) _____
 DECK ENTRIES (due by 11:00 am on 4/1/10) \$40 per swimmer including relays _____

RELEASE TO BE SIGNED: I the undersigned participant, intending to be legally bound, hereby verify 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 in Masters Swimming (training and competition) including possible permanent disability and 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 LEGAL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ANY CLAIMS FOR LOSS OR DAMAGE CAUSED BY NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUAL OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide and be governed by the rules of USMS.

ATHLETE'S SIGNATURE: _____ DATE: _____



Informed Consent Waiver and Release of Liability

Assumption of Risks: Physical activity, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The Department of Campus Recreation ("DCR"), through its Campus Recreation Center ("CRC"), provides for activities such as weight lifting, running, aerobic activities, classes, and other sporting activities. These activities involve strenuous exertions of strength using various muscle groups, some involve quick movements using speed and change of direction, and others involve sustained physical activity that places stress on the cardiovascular system. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; and 3) catastrophic injuries including paralysis and death. I understand, and appreciate that the activities and programs at the CRC carry certain inherent risks, and I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Waiver of Liability and Indemnification: In consideration of permission to use, today and on all future dates, the property, facilities, staff, equipment, services, and programs of the DCR, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and agree not to sue the State of Ohio, the University of Cincinnati and its governing board, officers, employees, and agents ("Releasees") from any and all liability for any harm, injury, damage, claims, demands of any kind, actions, causes of action, costs and expenses that I may have or that hereafter may accrue to me, arising out of any loss, damage, or injury, including death, that may be sustained by me or any loss or damage to any property belonging to me, whether caused by the negligence, misfeasance, or nonfeasance of Releasees or otherwise while in or upon premises or equipment of the CRC or engaged in any activity or program offered at the DCR.

I also agree to INDEMNIFY AND HOLD Releasees HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees, that result from my participation in or involvement with any program or activity at or associated with the CRC and to reimburse Releasees for any incurred expenses.

I further agree to comply with the stated and customary terms and conditions of participation and agree that if any unusual or significant hazard is observed, my activities will be discontinued and I will immediately bring such matter to the attention of the nearest official.

Acknowledgment of Understanding: I have read this Agreement, fully understand its terms, and understand that it affects my legal rights. I am signing this Agreement knowingly and voluntarily, and intend for it to be a complete and unconditional release of liability to the greatest extent allowed by law.

Signature: _____ Date: _____ Print Name: _____

If under 18, this Agreement must be signed by a parent or guardian before a child or teenager can engage in any activity.

Signature: _____ Date: _____ Print Name: _____

Person(s) under 18, parent or guardian is responsible for: _____

Home Address: _____

City/State/Zip: _____

Home or Cell Phone: () - _____ Business Phone: () - _____

Email: _____

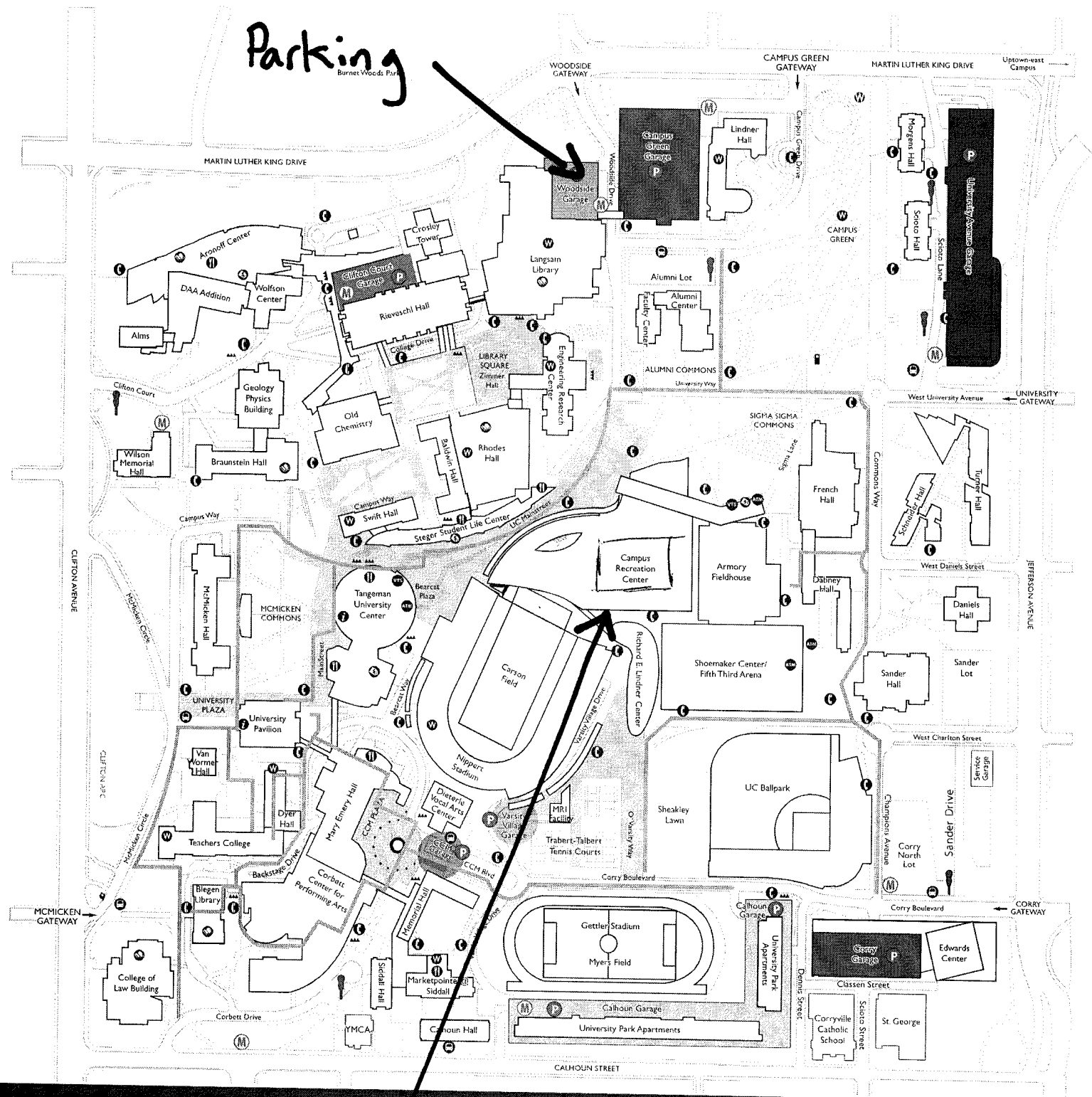
Emergency Contact Information:

Last Name: _____ First Name: _____

Home Phone: () - _____ Work Phone: () - _____

Relationship: _____

Parking



Student/Visitor Uptown west Campus Map

Pool

- Calhoun Garage
- Campus Green Garage
- CCM Garage
- Clifton Court Garage
- Corry Garage
- University Avenue Garage
- Varsity Village Garage
- Woodside Garage
- Information
- Help Phones
- Parking Garages/Lots
- Libraries
- Dining
- Shopping
- Accessible Route
- Wireless Locations
- ATM/MTS
- Shuttle Stops
- Bike Rack
- Motorcycle Parking
- Metered Parking