

## 14<sup>th</sup> Annual Milford Meltdown Masters Swim Meet

Hosted by Milford Athletic Club Saturday, Mar 18th- Milford High School

Location: Milford High School Natatorium, 2380 South Milford Rd, Highland, MI 48357 Milford High School is 1.5 miles south of M-59, enter on Watkins Blvd. The pool entrance is located on the north end of the school by the football field.

Venue: Short Course Meters / 6 Lane Pool. Warm Up & Cool Down Area and Electronic Timing. There is plenty of parking and seating for spectators. Locker rooms are available. Huron Valley is not responsible for lost or stolen items so please bring a lock. This meet will be swum as Short Course Meters (SCM). 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. The primary timing system will be automated with the sound device at the start and swimmer touching the pad at the finish with the time recorded on a scoreboard. Official times from this automated timing system will be submitted for USMS Records and USMS Top Ten times for all courses. For Short/Long Course Meters the time will be submitted to FINA for Masters FINA Top Ten and Masters FINA World Records.

Entries: On-Line Registration: \$35. Register Online at: www.michiganmasters.com.

Online registration closes Friday, 3/17/23, at 5:00 p.m.

Deck Entry Registration: \$45 Deck entries close at 9:15am

Swimmers may enter a max of 5 events and 3 Relays All relays will be deck entered

FINA rules apply to SCM Meets. Your age on 12/31/2023 determines your age group.

By registering for this event you have bought a 'ticket'. As with a ticket to any sports or entertainment events there are no refunds or credits if you are unable to attend.

Eligibility: Only current USMS members will be allowed to compete.

Sanctioned by Michigan for USMS, Inc – Sanction # 193-S001

Schedule: Session I Event 1
Check In & Warm Up: 8:00-8:30am

Session I Starts 8:30 am and will consist only of the first 18 entries received for the 800 Free. We will contact

you if you're **not** in the 800. If not at max and you are coming early, we will allow deck entries on a first come basis.

## **Session II Events 2-20**

**Deck Registration closes at 9:15am** Session II Warm Up: 9:30-10:00 Session II Begins at 10:00am

Contacts: Jim Izzi jimjtg@icloud.com

Kris Goodrich macswimgoblue@gmail.com

Hospitality: Snacks available during the meet

All proceeds from this meet benefit Milford Athletic Club, a non-profit 501(c) organization.

## USMS Masters Swimming Meet Hosted by MAC at Milford High School – Saturday, March 18, 2022 Maximum 5 individual events USMS Sanction # 193-S001

NAME:		Email:			
Street Address:					
City / State / Zip:		Date of Birth:			
Emergency Contact Name		Emergency Contact Number:			
Phone:	Sex:	USMS#:			

<b>EVENT No.</b>	EVENT	<b>EVENT No.</b>	Seed Time			
Session 1	warm up 8:00-8:30am	Session 1	MUST check in for session			
Men's		Mixed				
1	800 free	1				
Session 2	warm up 9:30-10:00	Session 2	Deck Registration Closes at 9:15am			
2	400 Free Relay (4 M or 4 W)	2	MUST enter relay by 9:30am			
2a	400 Free Relay (X) Mixed (2 M/2 W)					
3	200 IM	3				
4	100 Back	4				
5	50 Fly	5				
6	200 Free	6				
7	100 Breast	7				
8	400 Medley Relay (4 M or 4 W)	8	MUST enter relay by event 2			
8a	400 Medley Relay (X) Mixed (2 M/2 W)					
9	100 IM	9				
10	200 Fly	10				
11	100 Free	11				
12	50 Back	12				
13	400 Free	13				
14	50 Breast	14				
15	400 IM	15				
16	200 Back	16				
17	50 Free	17				
18	200 Breast	18				
19	100 Fly	19				
20	800 Free Relay (4 M or 4 W)	20	MUST enter relay by event 11			
20a	800 Free Relay (X) Mixed (2 M/2 W)					



## 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 acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19, or other viral or bacterial infection, while participating in any of the Events, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I agree that if I have a fever, cough, feel short of breath, have any other symptoms, have knowingly been exposed to a communicable disease such as COVID-19 I agree not to participate in USMS activities for a minimum of 10 days from the date the symptoms started, until the symptoms have subsided or I have been cleared by a doctor. If I test positive for COVID-19 within 10 days following participation in a USMS activity, I will notify the USMS event director, coach or club administrator immediately.
- 5. 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.
- 6. 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 (ci	rcle) F	Date of Birth (mm/dd/yyyy)				
Street Address, City, State, Zip									
Signature of Participant				Date	e Signed				

Revised 04/28/2022