

FORT WAYNE YMCA SHARKS MASTERS SWIM
3rd Annual SUMMER SPLASH INVITATIONAL
Fort Wayne, IN, September 10th, 2022

- SANCTION:** Held under the sanction of Greater Indiana Masters Swimming
Sanction #:162-S003
- SPONSORS:** Fort Wayne YMCA Sharks Masters Swim Team
- LOCATION:** Jorgensen Family YMCA, 10313 Aboite Center Rd. Fort Wayne, IN 46804 (Ph 260-432-8953)
- MEET DIRECTOR:** For meet information call the Meet Director, Austin Kelly, at 260-755-4825
- FACILITY:** Outdoor six lane 25-yard competition course with a 3.5-foot minimum depth and non-turbulent lane lines for short course competition.
- The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with USMS articles 105.1.7 and 106.2.1.
- Head timing, two timers per lane. Final times averaged. Guests and competitor assistance will be needed during meet.
- Times from this competition will be eligible for USMS Top 10 consideration but not for world or USMS records. See Article 202.1.1 A4c and Article 103.18.9.
- SCHEDULE:** Saturday Warm-up at 11:00 am EDT.
All heats of the 500 start at 12:00 pm EDT.
A 30-minute break/additional warmup will be held after the conclusion of the 500.
- REFRESHMENTS:** Water throughout meet.
- RULES:** Current USMS rules/regulations will govern the conduct of the meet.
- ELIGIBILITY:** All participants must be currently registered with USMS swimming. Participants do not have to be YMCA members. To register with USMS go to: <https://www.usms.org/reg/register.php>. A copy of your 2022 USMS card is required with completed entry.
- ENTRY:** Entries will not be accepted without up-to-date USMS card. There is a \$20.00 PER PERSON entry fee. Entry form (attached) & fee must be received by September 9, 2022. Deck entry fee is \$30 per person and will be accepted from 10:30am-11:00am EDT. Swimmers may enter in up to 6 events.
- MEET FORMAT:** This is a timed final meet. All individual events will be scored as 18-24, 25-29, 30-34, 35-39, 40-44, etc. Age determined as of 9/12/22. All relay events will be scored as: 18+ 25+ 35+ 45+ 55+ 65+ 75+ according to the youngest swimmer on the relay team. All names and ages must be on event entry cards for relays. Relays may be deck entered by 11:00AM EDT the day of the meet.
- AWARDS:** Ribbons will be awarded to the 1st through 3rd places for gender and age group.
- SEEDING:** Swimmers may be seeded on the basis of submitted times regardless of age and gender. Entrants submitting "no time" will be placed in the slowest heat with heats swum from slowest to fastest.

MEET ENTRY FORM

Fort Wayne YMCA SHARKS MASTERS SWIM
3rd Annual SUMMER SPLASH INVITATIONAL
Fort Wayne, IN
Saturday, September 10th, 2022

Mail:

1. This completed form including a
2. Copy of your USMS registration card with
3. Entry fee (make checks payable to Jorgensen Family YMCA) and
4. Signed and dated Waiver on next page to:

Austin Kelly, 10313 Aboite Center Rd, Fort Wayne, IN 46804
Austin_kelly@fwymca.org

No	ORDER OF EVENTS LIMIT 6	SEED TIME
1	500 Freestyle (30 min break)	
2	100 Freestyle	
3	50 Breaststroke	
4	200 IM	
5	100 Butterfly (10 min break)	
6	200 Freestyle	
7	50 Backstroke	
8	100 Breaststroke	
9	100 IM	
10	200 Medley Relay (10 min break)	
11	50 Freestyle	
12	50 Butterfly	
13	100 Backstroke	
14	200 Freestyle Relay	

Name: _____

Address: _____

Male/Female (Circle)

USMS Number: _____

Birth Date: _____

Age: _____

Phone: _____

Team: _____

Y member? Y/N

Contact person in case of emergency: _____

Contact person phone number: _____

Sec. 202.1.1 G (5) of the USMS rules require you to submit a copy of your current registration card with each meet entry form. Please place your current membership card here and make a copy.

Signed: _____ Date: _____

Please also print and sign the waiver on the next page.



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 (circle) M F	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed

Revised 04/28/2022