

**2018 Puget Sound Masters SCM Championship Meet
and Pacific NW Zone Championship**
Saturday – Sunday, November 17-18, 2018
Hosted by Puget Sound Masters
Sanctioned by PNA for USMS Inc. #368-S008
Observed for USA Swimming

LOCATION: Weyerhaeuser King County Aquatic Center, 650
SW Campus Drive, Federal Way, WA 98023 206-
296-4444

FACILITY: 50-meter championship pool set up as
two 25m courses, each with 9-ft wide lanes and a
water depth range of 9'-10.5' Continuous warm-
up available in 7-lane, 25-yd dive tank. The length
of the competition course is in compliance and on
file with USMS in accordance with articles 105.1.7
and 107.2.1, but as a bulkhead course, is subject
to length confirmation. Eligibility of times for
USMS Top 10 and Records will be contingent on
verification of bulkhead placement.



TIMING SYSTEM: The primary timing system will be
automatic timing. Times may be submitted for USMS records
and USMS Top 10 consideration.

SCHEDULE: Saturday, Nov 17 and Sunday Nov 18:
• Warm-up 9:00-9:50am, meet starts 10 am

MEET DIRECTOR: Lisa Dahl, waterpolo890@hotmail.com
206-337-2204

MEET REFEREE: Teri White, teriwhite53@gmail.com

CONCESSIONS: KCAC vendor, available in lobby.

RULES: Current USMS rules will govern the meet. Strictly
forbidden: using hand paddles, fins or kick boards in warm-
up areas; diving in warm-up areas unless in designated
sprint lanes.

ELIGIBILITY: Open to all 2018 USMS or foreign registered
swimmers 18 and above as of 11/18/2018. Foreign
registered swimmers must provide a copy of their current
registration card. Age groups based on the swimmer's age
as of 12/31/2018. 18-24, 25-29... and up in 5-yr increments

ENTRIES: Swimmers may enter up to 6 individual events, 6
individual events/day max.

- **Individual entries and Relay-Only Swimmers:** Entries
must be submitted online by 11:59 PM (Pacific)
Sunday, November 11, 2018 OR postmarked by
Wednesday, November 7, 2017
- **Relay teams** may be entered from 9:00 AM Monday,
November 12th to 11:59 PM Wednesday, November
14th
- Deck entry for relays will also be available at the
meet. See 'Relays', below.
- Swimmers will register by CLUB (i.e. PSM, BWAQ)
rather than workout group (i.e. LWM, GLAD)

**NO INDIVIDUAL ENTRIES ACCEPTED AFTER SUNDAY NOV 11TH,
2018 11:59 PM (PACIFIC TIME)**

SEEDING: At the discretion of the Meet Referee and Meet
Director, two courses may be used for the 800 Free, 400

Free, and 1500 Free. A single course will be used for all other
events. All events slow to fast. Pre-seeding except for
asterisked events, below.

POSITIVE CHECK-IN DEADLINES: Saturday: 800 Free –
9:30am; 400 IM – 9:30am; Sunday: 400 Free – 9:30am, 1500
Free – end of Event #34. Swimmers missing the check-in
deadline will be scratched from the event.

RELAYS: Age groups (sum of ages): 72- 99, 100-119,
120-159, 160-199, 200-239, 240-279, ... (40-year
increments as high as necessary). The aggregate age of
the four relay team members determines the relay age
group. Mixed relays require two men and two women.

• Relays may be entered online before the meet or
deck-entered at the meet. Deck Entry Relay entries
due as follows:

- #9-#11: by the end of event #2,
- #20-#22: by the end of event #13,
- #31-#33: by the end of event #23,
- #40-#41: by the end of event #34

AWARDS:

- Medals may be purchased at meet.
- High point awards for each gender and age-group
combination

ENTRY FEES: \$38.00 includes LMSC surcharges. **PLUS** \$4 per
individual event (optional for seniors and needs-based
swimmers). No charge for relays. Relay only swimmers pay
\$38.00 surcharge.

ONLINE ENTRIES: Enter online at:

https://www.clubassistant.com/club/meet_information.cfm?c=1534&smid=10826

ENTRY QUESTIONS: [Linda Chapman:](mailto:chapman_family@comcast.net)

chapman_family@comcast.net

| 2018 PSM SCM Order of Events | | | |
|---|------------------------|----------------|----------------------------|
| Saturday, Nov 17 | | Sunday, Nov 18 | |
| 50m, 100m and 200m events: Order W then M | | | |
| | Warm Up 9am | | Warm Up 9am |
| 1 | 800 Free - Mixed * | 23 | 400 Free - Mixed * |
| 2/3 | 200 IM - W/M | 24/25 | 100 Breast - W/M |
| 4/5 | 50 Back - W/M | 26/27 | 50 Fly - W/M |
| 6/7 | 200 Fly - W/M | 28/29 | 200 Free - W/M |
| 8/9 | 100 Free - W/M | 30/31 | 100 IM - W/M |
| | Break 5 minutes | | Break 5 minutes |
| 10/11 | W/M 200 Free Relay | 32/33 | W/M 400 Free Relay |
| 12 | Mixed 400 Medley Relay | 34 | Mixed 200 Medley Relay |
| 13 | 400 IM - Mixed * | 35/36 | 50 Breast - W/M |
| 14/15 | 100 Back - W/M | 37/38 | 200 Back - W/M |
| 16/17 | 50 Free - W/M | 39/40 | 100 Fly - W/M |
| 18/19 | 200 Breast - W/M | | Break 5 minutes |
| | Break 5 minutes | 41/42 | W/M 200 Medley Relay |
| 20/21 | W/M 800 Free Relay | 43 | 1500 free - Mixed * |
| 22 | Mixed 200 Free | * | Positive Check-In Required |

DIRECTIONS: From North or South Bound I-5 take exit 142 B.
Proceed west on South 348th St for 2 miles. South 348th
changes to SW Campus Dr. at 1st Ave. The pool is on the
right.

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PAPER ENTRIES: Complete this form, and waiver on following page, for a paper entry.

If using paper entry form, you must complete, sign and mail the USMS Waiver on the following page.

NAME: _____ M F AGE: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE _____ Email _____
 BIRTHDATE: ____/____/____ USMS #: _____ - _____

Include a copy of your USMS Registration if not a PNA member

| | |
|---|--|
| LMSC: (PNA, Oregon, Inland NW, etc.) | PNA Club: (UC36, BWAQ, PSM, ROCK) |
|---|--|

ENTRY LIMIT: 6 INDIVIDUAL EVENTS (5 per day) PLUS RELAYS

| Event # | Event Name | Entry Time |
|---------|------------|------------|
| | | |
| | | |
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| | | |
| | | |
| | | |

ENTRY FEE:

| | | |
|--------------------------|----------------|--|
| SURCHARGE | \$38.00 | |
| INDIVIDUAL EVENTS | + | \$4 Per Event. No charge for relays. No charge for seniors (65+) or need-basis |
| TOTAL | \$ | Make checks payable to PSM . Mail to: PSM, c/o Linda Chapman 17532 NE 142 nd St Redmond, WA 98052 |

Paper entries must be **postmarked** by Tuesday, November 7th, 2017. All swimmers must have a valid 2017 USMS (or foreign) registration prior to meet entry or submit an application accompanying this entry.

| | |
|---|-------------|
| Signature | Date |
| _____ | _____ |
| <input type="checkbox"/> <u>This is my first Masters meet</u> | |

| |
|--------------------------------|
| Emergency Contact: _____ |
| Emergency Contact Phone: _____ |



**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 |