



Adirondack District Masters Swimming



Spring off the Blocks Meet at the Guilderland YMCA

Saturday, March 2, 2019

Warm-up at 1:00 PM. Meet starts at 2:00 PM.

Hosted by: Guilderland YMCA and the Cyclones Swim Team

Sanctioned by: AD- LMSC for United States Masters Swimming in accordance with Article 202.1.1, Sanction #039-S002

SAVE TIME, SAVE PAPER, AVOID ERRORS. REGISTER ONLINE AT:

https://www.clubassistant.com/club/meet_information.cfm?c=1538&smid=11393

Location: The Guilderland YMCA, 250 Winding Brook Drive, Guilderland NY 12084. Short Course 25 Yard Pool, 8 lanes. Water Depth: 9 ft 6 in at the start end and 3 ft 6 in at the turn end. The length of the competition course is in compliance without a bulkhead and on file with USMS in accordance with articles 105.1.7 and 107.2.1.

Directions: Winding Brook Drive in Guilderland intersects with Western Avenue (US Route 20), one mile west of Hamilton Square Shopping Center and one-half mile east of the Guilderland Public Library. **From north:** I-87 (The Northway) south to Western Avenue (US Route 20) in Guilderland. Turn right onto Western Avenue (US Route 20 going west towards Duanesburg). Drive 3.2 miles west on Western Avenue (US Route 20). Turn left onto Winding Brook Drive. The Guilderland YMCA will be on your left. **From south:** I-87 (The Thruway) north to Albany. Take exit 24 for I-90 E/I-87 N toward Albany/Montreal. Merge onto I-90E/I-87N. Take exit 1S to Western Avenue (US Route 20) in Guilderland. Turn right onto Western Avenue (US Route 20 going west towards Duanesburg). Drive 3.2 miles west on Western Avenue (US Route 20). Turn left onto Winding Brook Drive. The Guilderland YMCA will be on your left.

Meet Director: Kathy Meany, kmeany2@verizon.net, 518-334-6663.

Eligibility: Open to all swimmers, 18 & older, as of March 2, 2019. All swimmers must be registered with USMS (or the equivalent FINA organization). If registering for the meet online, your USMS membership will be verified online. If registering for the meet by mail, you must include a copy of your registration card. If you need to join or renew USMS membership, please visit www.adms.org and follow the instructions. The age of a swimmer is his or her age on March 2, 2019.

Events: This is a pre-seeded meet with events being swum slowest to fastest. A swimmer may enter up to six individual events. Swimmers entered in event #4, the 500 freestyle must check-in by 1:15 PM. Swimmers entered in events #21 or #22, the 1000 and 1650 freestyle must check-in by 3:00 PM. Swimmers failing to check-in by the stated time will be scratched from the event. A swimmer may compete in the 1000 freestyle or the 1650 freestyle, not both.

Rules: 2018 USMS rules govern this meet. This includes no diving or backstroke starts in warm-up or cool down lanes except in the one-way designated sprint lanes. One lane will be available throughout the meet for warm-up and cool-down.

Timing and Results: The primary timing system will be Colorado automatic timing. Results will be posted at www.adms.org. The official times for this meet will be submitted for USMS records and USMS Top Ten.

Entries: The entry fee is \$6.00 per individual event plus a \$6.00 meet surcharge. **No deck entries will be accepted. Mailed entries must be postmarked by Saturday, February 23, 2019. Online entries must be completed by 11:59 PM on Wednesday, February 27, 2019. Online entries are preferred and can be performed through Club Assistant:**

https://www.clubassistant.com/club/meet_information.cfm?c=1538&smid=11393

Credit cards will be charged by "ClubAssistant.com Events." This is the name you will see on your credit card statement.

If you are mailing an entry: Make your check payable to “Adirondack LMSC”. Mail signed waiver, entry form, a current copy of your USMS or MSC card, and a check postmarked by Saturday, February 23 to: Kathy Meany, 115 Bozenkill Road Altamont, NY 12009. Email: kmeany2@verizon.net. Phone: 518-334-6663.

2019 Spring off the Blocks at the Guilderland YMCA Entry Form

Staple <i>legible</i> copy of USMS or MSC card here		Please supply the following information:	
USMS/MSC Number	Club (as stated on USMS/MSC card)	Day Phone ()	
Name & Address (Name EXACTLY as it appears on USMS/MSC card)		Evening Phone ()	
Gender	Birth date	Age (as of March 2, 2019)	Email

In case of emergency, contact: Name _____ Phone: _____

1:00 PM WARM-UP 2:00 PM START

EVENT #	EVENT	ENTRY TIME (Short Course Yards)
1	100 BUTTERFLY	
2	25 FREESTYLE	
3	200 BREASTSTROKE	
4	500 FREESTYLE	
5	200 BACKSTROKE	
6	100 INDIVIDUAL MEDLEY	
7	200 BUTTERFLY	
8	50 FREESTYLE	
9	25 BACKSTROKE	
10	100 BREASTSTROKE	
11	100 BACKSTROKE	
12	25 BUTTERFLY	
13	100 FREESTYLE	
14	50 BACKSTROKE	
15	200 INDIVIDUAL MEDLEY	
16	50 BREASTSTROKE	
17	200 FREESTYLE	
18	50 BUTTERFLY	
19	400 INDIVIDUAL MEDLEY	
20	25 BREASTSTROKE	
21	1000 FREESTYLE	
22	1650 FREESTYLE	

Total Due: _____ # of individual events X \$6.00/event + \$6.00 meet surcharge= \$ _____ .00. Make checks payable to **Adirondack LMSC**. **FIRST-TIMERS:** If this is your first meet and you are a member of Adirondack-LMSC, you are eligible for a First-Timer T-shirt: Please circle size: **M L XL**

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**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	