

## 2017 Second Anniversary Weekend @ Bernie's Swim Meet Saturday, December 16, 2017 in Fort Walton Beach, Florida

**SANCTIONED BY:** Southeastern Masters Swimming for U. S. Masters Swimming, Inc., Sanction No. 157-S012

**HOSTED BY:** Okaloosa Liquid Dragons Swim Team.

**MEET DIRECTOR:** Kathi Heapy – phone # 850-585-6233, email: [ecfitnessfoundation@cox.net](mailto:ecfitnessfoundation@cox.net)

**MAIL ENTRIES TO:** Kathi Heapy, 51 Meigs Drive, Shalimar, FL 32579. Daytime Phone # 850-243-1233.

**FAX ENTRIES TO:** 850-243-5786, attn.: Kathi Heapy

**ENTRY FEE:** \$40 per swimmer – includes dinner party immediately following meet .

Make check payable to: Tiffany Sydow

**ENTRY DEADLINE:** Entry deadline is Tues., Dec. 12, 2017. Entries must be received, not postmarked, by the deadline. Late entries arriving by email and by fax after that date will be accepted at the discretion of the meet director, plus a \$10.00 late entry fee, and only if such entries do not require additional heats. On-line entry is encouraged.

**DECK ENTRIES:** Deck entries will be allowed at the discretion of the Meet Director. We will try to accommodate deck entries but only if such entries do not require additional heats. Swimmers registering for the meet as deck entries will be asked to pay both the regular and the late entry fees. Deck entries made by swimmers registered in our meet simply to enhance their or their team's chance to score points will not be accepted.

**FACILITY:** Bernie R. Lefebvre Aquatic Center, 1127 Hospital Road, Fort Walton Beach, FL 32548. 25 Yard indoor, 6 lane competition pool, 6' deep tapering to 4' deep. 5 lanes will be used for competition and 1 lane will be designated for warm-up/warm-down.

**RULES:** 2017 USMS Rules and Southeastern LMSC Safety guidelines and warm-up procedures will govern. Safety guidelines specify feet-first entry during warm-ups except for designated sprint lanes.

**ELIGIBILITY:** All swimmers must be registered with United States Masters Swimming, Inc. Please enclose a photocopy of your year 2017 USMS registration with your entry materials. If not provided in advance, you will be asked to show a 2017 USMS registration card when you check in. Swimmers will be able to register with USMS at the meet.

**ENTRIES:** A swimmer may enter up to 5 individual events, exclusive of relays. Please submit entries on the attached form. Entry times will be assumed to be in yards unless otherwise indicated. NT entries will be seeded as slowest times. Please avoid using NT times whenever possible, and please use realistic entry times.

**SEEDING:** All events will be seeded slow to fast and without regard to age or gender. Results will be tabulated by gender and age group as defined by USMS.

**SCHEDULE:** Warm-up will begin at 10:00 a.m.. Competition will begin at 11:00 a.m..

**HEAT SHEETS:** Will be available at the meet at no charge.

**SCORING:** First 5 finishes in each event, by age and gender, will be scored as follows: Individual events 6,4,3,2,1; Relay events 12,8,6,4,2. For purposes of awards and scoring, the age of the youngest relay team member shall determine the age group in the following age categories: 18+, 25+, 35+,45+, 55+, 65+, 75+, 85+, etc.

**RELAYS:** Relays will be deck-entered using forms provided at the meet. Relay team members must be registered with the same club. Relay points will count towards team point totals but not towards individuals point totals.

**AWARDS:** High point awards will be given to top male and female swimmers in each age group based on points scored in individual events. There will also be a high point team award. Age groups for individual events are: 18-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85-89, 90-94, etc. Your age is determined as of the day of the meet.

**EMERGENCY PHONE CONTACT:** The phone number at the pool office is 850-863-7946. This number is for emergency purposes only during competition.

**CONCESSIONS AND SEATING:** There is no concession stand at the swimming pool. You are welcomed to bring in coolers. There are two sets of bleachers at the pool. There is a pro-shop on the property where swim supplies, snacks and drinks will be available for sale.

### Directions to the Pool:

From I-10: Exit 56 to Crestview and head South on FL Hwy 85, take slight right onto FL-123 South, go right on to FL Hwy 85 South, take the first right on to Gen. Robert W. Bond Blvd, then Slight right on to FL-189 (Lewis Turner Blvd.) south. Travel approx. 1.5 miles to the stoplight at Hospital Road. Turn left at the light, and then first left through the gate to enter the Ron Crawford Recreation Center. The Bernie R. Lefebvre Aquatic Center entrance is through the patio gate in the center of the building.

From US Hwy 98:

Turn left on to Doolittle Blvd in Mary Esther, FL. Head north, at the first traffic circle take the left exit on to Hollywood Blvd. At the second traffic circle, take the first exit to the right on to Hill Ave. Continue on that street-it will change into Martin Luther King, Jr. Blvd., then Green Acres Blvd. At the stoplight at Green Acres and Beal Pkwy (McDonalds on NE corner), turn left on to Beal Pkwy, then round the bend and turn right at the light on to Hospital Road. Take the first left through the gate to enter the Ron Crawford Recreation Center. The Bernie R. Lefebvre Aquatic Center entrance is through the patio gate in the center of the building.

**2017 Second Anniversary**  
**Weekend @Bernie's (SCY) Swim Meet Entry Sheet**  
**Saturday, December 16, 2017**  
**Bernie R. Lefebvre Aquatic Center, Ft. Walton Beach, Florida**

NAME \_\_\_\_\_, \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_  
 (Last, First) (Age as of 12/9/2017)

POSTAL ADDRESS \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ USMS REGISTRATION NO. \_\_\_\_\_  
*(Legibility is a virtue)* *(Please attach copy of 2017 USMS registration card)*

DAYTIME PHONE ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

EVENING PHONE ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

**Entry Fees: Please make checks payable to:**  
**Tiffany Sydow**  
**Meet entry fee: \$40.00** (includes dinner party immediately following meet)

SWIM CLUB NAME \_\_\_\_\_ SWIM CLUB ABBREVIATION \_\_\_\_\_ )

**SATURDAY December 16, 2017**

Warm-ups at 10:00 a.m.; Competition at 11:00 a.m.

<b>WOMEN</b>			<b>MEN</b>	
<u>Event No.</u>	<u>Entry Time</u>	<u>Event</u>	<u>Entry Time</u>	<u>Event No.</u>
1	deck enter	200 Yard Mixed Medley Relay	deck enter	1
2	_____	100 Yard Free	_____	3
4	_____	50 Yard Fly	_____	5
6	_____	100 Yard Back	_____	7
8	_____	50 Yard Free	_____	9
10	_____	100 Yard Breast	_____	11
12	_____	50 Yard Back	_____	13
14	_____	500 Yard Free	_____	15
16	_____	100 Yard Fly	_____	17
18	_____	50 Yard Breast	_____	19
20	_____	100 Yard IM	_____	21
22	_____	200 Yard Free	_____	23
24	deck enter	200 Yard Free Relay (women)		-
-		200 Yard Free Relay (men)	deck enter	25
26	_____	1000 Yard Free	_____	27



**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



EMERALD COAST FITNESS FOUNDATION, INC.  
9 CAMBRIDGE AVENUE  
FORT WALTON BEACH, FL 32547  
FEIN: 47-2708975

## INDEMNITY AND HOLD HARMLESS AGREEMENT

I \_\_\_\_\_ am a participant in the 1st Anniversary Weekend @ Bernie's Master's Swim Meet and acknowledge that by signing this document, I am releasing the Okaloosa Liquid Dragons Swim Team, Tiffany Sydow, Emerald Coast Fitness Foundation, Inc., Liza Jackson Preparatory School, Inc. and the City of Fort Walton Beach, its officers, agents and employees from liability. This is a contract with legal consequences. I have been advised to read it carefully before signing.

The undersigned hereby covenants and agrees to investigate all claims of every nature at its own expense and to indemnify, protect, defend, hold and save harmless Okaloosa Liquid Dragons Swim Team, Tiffany Sydow, Emerald Coast Fitness Foundation, Inc., Liza Jackson Preparatory School, Inc. and the City of Fort Walton Beach, its officers, agents and employees, from any and all claims, actions, lawsuits and demands of any kind or nature arising out of this agreement.

For and in consideration of the opportunity to participate in swimming activities at the Bernie R. Lefebvre Aquatic Center swimming facility at 1127 Hospital Road, Fort Walton Beach, Florida, the undersigned participant, my heirs, successor and assigns, forever hold harmless the Okaloosa Liquid Dragons Swim Team, Tiffany Sydow, Emerald Coast Fitness Foundation, Inc., Liza Jackson Preparatory School, Inc. and the City of Fort Walton Beach, its officers, agents and employees from any and all liability whatsoever for any personal property damage or for any personal injury that may result from said participation.

I agree, for myself, my successors and assignee, that the above representations are contractually binding and are not mere recitals, and that should I or my successors assert any claim in contravention of this agreement, the asserting party shall be liable to the expenses (including legal fees) incurred by the other party or parties.

This agreement may not be modified orally, and waiver of any provision shall not be constructed as a modification of any provision herein or as consent to any subsequent waiver or modification. I am at least 18 years of age and suffer from no physical, mental, legal or other disabilities that prevent me from fully understanding the terms of signing this agreement.

**DATE:** \_\_\_\_\_

**PARTICIPANT'S SIGNATURE:** \_\_\_\_\_

**PARTICIPANT'S NAME (printed):** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PHONE#:** \_\_\_\_\_

**EVENT NAME: 2nd Anniversary Weekend @ Bernie's Master's Swim Meet**