

## 2019 Dotty Whitcomb Memorial Turkey Dip Swim Meet Saturday, November 16, 2019 in Pensacola, Florida

**SANCTIONED BY:** Southeastern Masters Swimming for U. S. Masters Swimming, Inc., Sanction No. 159-S010

**HOSTED BY:** Gulf Coast Pirate Swimmers.

**MEET DIRECTOR:** Chris Barfield, 850- 572-8322, or email christophert@att.net

**MAIL ENTRIES TO:** Kay Miller, 861 Chadwick Street, Pensacola, FL 32503. Phone # 850-261-5848, email: kmiller@pensacolastate.edu

**FAX ENTRIES TO:** 850-484-1876, attn.: Kay Miller

**ENTRY FEE:** \$35 per swimmer – includes dinner party immediately following meet at Sonny's Barbeque, 9<sup>th</sup> Ave. Make check payable to: Gulf Coast Pirate Swimmers

**ENTRY DEADLINE:** Entry deadline is Tues., Nov 12, 2019. 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.

**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:** Pensacola State College Aquatics Center, 1000 College Blvd., Building 3, Pensacola, FL 32504. This is a 25 Yard indoor, 6 lane competition pool, 9' deep tapering to 4' deep. 5 lanes will be used for competition and 1 lane will be designated for warm-up/warm-down.

**Pool Length:** 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.

**RULES:** 2019 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 2019 USMS registration with your entry materials. If not provided in advance, you will be asked to show a 2019 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 12 Noon. Competition will begin at 1:00PM.

**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 850-484-1311. This number is for emergency purposes only during competition.

**HOTEL ACCOMMODATIONS:** Hampton Inn, 2187 Airport Blvd, Pensacola, FL 32504. Phone # 850-478-1123.

**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. We will have some snacks and water available for swimmers and families at the meet.

### Directions to the Pool:

- From I-10 East/West to I-110 to Airport Blvd. exit. Left A onto Airport Blvd. to 12<sup>th</sup> Ave. Left on 12<sup>th</sup> Ave. to College Blvd. Go past WSRE building on right and turn right into the pool parking lot. Pool is in Building 3 on the right side of the building.
- From Hwy. 98, over the Three Mile Bridge to I – 110 North. Exit at Airport Blvd. Turn onto Airport Blvd. to 12<sup>th</sup> Ave. Turn left on 12<sup>th</sup> Ave to College Blvd. Go left onto College Blvd, past WSRE Building on right and turn right into the pool parking lot. Pool is in Building 3 on the right side of the building.

**2019 Dotty Whitcomb Memorial  
TURKEY DIP (SCY) Swim Meet Entry Sheet  
Saturday, November 16, 2019 at PSC Natatorium, Pensacola, Florida**

NAME \_\_\_\_\_, \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_  
(Last, First) (Age as of 11/16/2019)

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

EMAIL ADDRESS \_\_\_\_\_ USMS REGISTRATION NO. \_\_\_\_\_  
(Legibility is a virtue) (Please attach copy of 2019 USMS registration card)

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

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

BIRTHDATE \_\_\_\_\_

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

**Entry Fees: Please make checks payable to:  
Gulf Coast Pirate Swimmers  
Meet entry fee: \$35.00 (includes dinner party  
immediately following meet)  
Guest for dinner: \$10.00**

**SATURDAY November 16, 2019**

Warm-ups at NOON competition at 1:00 p.m.

**WOMEN**

**MEN**

Event No.	Entry Time	Event	Entry Time	Event No.
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	_____	1650 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	