

MIAMI REDFIN MASTERS
ANNOUNCE THEIR

9th Annual Miami RedFin
Fall Masters Meet

Miami University Aquatic Center
Oxford, Ohio

SATURDAY, November 5, 2011

WARM UPS BEGIN AT 12:00PM
COMPETITION BEGINS AROUND 1:00PM

SEE ATTACHED INFORMATION
OR CALL 513-529-1995

**THE 9th ANNUAL
MIAMI REDFIN FALL MASTERS MEET
SHORT COURSE METERS SWIM MEET**

Saturday, November 5, 2011

Sanctioned by Ohio LMSC and USMS, Inc. Sanction #171 - 009

HOST TEAM:

Miami RedFin Masters

CONTACT:

Jennifer Wood, Assistant Director, Aquatic Center
513-529-1995
klinejm@muohio.edu

LOCATION:

Miami University Aquatic Center
700 South Oak Street
Oxford, Ohio 45056

FACILITY:

The Corwin M. Nixon Aquatic Center is a 25-yard by 50-meter facility. Eight lanes with a depth of 10 feet will be used for the competition in addition to a Colorado Timing System with two, Olympex digital LED video scoreboards.

Warm-up and cool-down lanes will be available adjacent to the competition pool. Daily lockers are available to swimmers with their own lock.

The Miami University Recreational Sports Center also has additional facilities available to participants who purchase a daily pass at the Pro Shop at the entrance to the facility. A food court is open on site for snacks. Coolers and outside foods are not permitted.

ELIGIBILITY:

Open to all swimmers who are registered with USMS. Each swimmer is responsible for his/her USMS card and will be required to show it upon request by officials.

To enter the meet, a copy of the swimmers current USMS registration card MUST accompany the entry form.

The meet entry form should display your registered name, number, and team name, according to your USMS card. Unattached swimmers note "UNAT." **Please print all information legibly.**

If a swimmer is not currently registered with USMS, applications and registration fees will be taken at the meet. Only checks made out to Ohio LMSC will be accepted for USMS registration. A self-addressed stamped envelope is required for USMS registration so that cards may be mailed out after the meet.

AGE:

The age reported on your entry form must reflect your age as of 12/31/10.

ENTRY FEES:

A flat fee of \$20 will be charged per person for teams or individuals who choose to submit entries on disk in Hy-Tek Meet Manager format. (5 individual event limit, plus 2 relays). A fee of \$25 will be charged for those that enter via the attached entry form. *NOTE* All individuals, regardless of entry method, must sign the waiver at the bottom of the entry form. A flat fee of \$40 will be charged for deck entries (5 individual event limit, plus 2 relays). Refunds will only be issued for documented medical reasons or if the meet is cancelled. Registration form, copy of USMS card, and payment may be made by mail or by fax to 513-529-1921. All faxes should be put to the attention of Jen Wood.

ORDER OF EVENTS: The meet will be deck seeded according to times submitted, regardless of age and gender. Heats will run slowest to fastest, with the exception of the 400 freestyle, which run fastest to slowest. Heat and lane assignments for all events will be posted around 1:00pm.

Deck Entries: **11:00-12:00pm**
Deck entry deadline: 12:00pm Eastern Standard Time 11/05/11
Relay cards due: 12:15pm Eastern Standard Time 11/05/11

Warm –Ups: **12:00-1:00pm**

Heat Sheet Posted: **around 1:00pm** (*participants should double check for accuracy at this time*)

Events: **1:10-6:00pm**

1	200 Medley Relay	10	200 Freestyle Relay
2	400 Individual Medley	11	100 Butterfly
3	50 Freestyle	12	100 Breaststroke
4	200 Backstroke	13	50 Backstroke
5	50 Butterfly	14	200 Freestyle
6	200 Breaststroke	15	100 Individual Medley
7	100 Freestyle	16	50 Breaststroke
8	200 Individual Medley	17	200 Butterfly
9	100 Backstroke	18	400 Freestyle Relay
		19	400 Freestyle

**WARM-UP &
COOL-DOWN:**

Entry into the pool must be feet first in a cautious manner with one hand in contact with the deck. Diving shall be permitted only from the blocks in the designated sprint lanes during warm-up. Warm-up and cool-down lanes will be provided. No diving will be permitted in these lanes. Instructions given by an official must be obeyed at all times. A swimmer may be disqualified at the discretion of the Meet Director or Meet Official for failure to comply with these rules.

DIRECTIONS:

From US Rt. 27 North (Patterson Ave.), turn left on Chestnut (stop light), turn right onto Campus Avenue (stop sign), and the Recreational Sports Center is on the right.

From US Rt. 27 South (High Street), turn right on Campus Ave, and the Recreational Sports Center is on the left.

**HOTEL &
ACCOMODATIONS:**

Call the Oxford Visitor's Bureau at 513-523-8687 for hotel and restaurant information.

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PRINT LEGIBLY OR TYPE

NAME _____ GENDER _____

BIRTHDATE _____ AGE ON 12/31/11 _____

USMS Number _____ TEAM _____

ADDRESS _____

CITY, STATE _____ ZIP _____

HOME PHONE (_____) _____ BUSINESS PHONE (_____) _____

E-MAIL _____

CREDIT CARD #: _____ EXP DATE: _____ AMT: _____
(if applicable) Visa or MasterCard _____

ATTACH A COPY OF CURRENT USMS CARD

Circle the event numbers in which you would like to be entered and show your seedtime to the hundredth of a second. If you do not enter a time you will be entered "NT."

EVENT #	SEED TIME	EVENT	EVENT #	SEED TIME	EVENT
1	*****	200 Medley Relay	10	*****	200 Freestyle Relay
2	_____	400 Individual Medley	11	_____	100 Butterfly
3	_____	50 Freestyle	12	_____	100 Breaststroke
4	_____	200 Backstroke	13	_____	50 Backstroke
5	_____	50 Butterfly	14	_____	200 Freestyle
6	_____	200 Breaststroke	15	_____	100 Individual Medley
7	_____	100 Freestyle	16	_____	50 Breaststroke
8	_____	200 Individual Medley	17	_____	200 Butterfly
9	_____	100 Backstroke	18	_____	400 Freestyle Relay
			19	_____	400 Freestyle

ADVANCE ENTRIES (postmarked by 10/26/11): \$20 per swimmer for the meet including two relays (disk entry) _____
 \$25 per swimmer for meet including two relays (paper entry) _____
 DECK ENTRIES (due by 12:00 pm EST 11/05/11) \$40 per swimmer for the meet including two relays _____

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 RELEASE TO BE SIGNED: I the undersigned participant, intending to be legally bound, hereby verify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters Swimming (training and competition) including possible permanent disability and death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL LEGAL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ANY CLAIMS FOR LOSS OR DAMAGE CAUSED BY NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUAL OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide and be governed by the rules of USMS.

ATHLETE'S SIGNATURE: _____ DATE: _____