

THE 25TH ANNUAL SWIM CLASSIC

HOSTED BY WEST MICHIGAN MASTERS SWIM ASSOCIATION
SUNDAY, FEBRUARY 19, 2012
USMS SANCTIONED #1912-005S

Location: **Grand Haven High School Pool**
17001 Ferris St
Grand Haven, MI 49417

Facilities: The facility is 25-yard, 8-lane pool. Colorado timing system & display, horn start. A continuous warm-up/cool-down area will be provided in the Diving Well. Parking is free. Ample spectator seating.

Keep all valuables with you or leave at home. Grand Haven Public Schools and Meet Director are not responsible for lost or stolen items.

Meet Director: Ken Danhof
4295 Carolyn St.
Muskegon, MI. 49444

Email: KJandM@comcast.net
Phone: (231) 739-5592 (home)
(616) 813-8394 (cell)

Schedule: Session I (Events 1&2)
Check-in / Deck Registration 9:15-10:15 a.m.
Full Pool Warm-up 9:30-10:15 a.m.
Meet Start 10:30 a.m.

Session II (Events 3-16)
Check-in / Deck Registration 9:15-11:00 a.m.
Diving Well Warm-up Diving well will be available.
Meet Start 11:30 a.m.

Entry Limit/Fees: Entries postmarked/received by Monday, February 13 are \$25.
Entries received after Monday, February 13 (or Deck Entries) are \$35.
Entry limit is 5 events plus 1 relay per swimmer.

Relays must be complete when arriving on the day of the meet, and cannot be completed using the Entry Form. **All entries must be sent to the Meet Director—Ken Danhof—listed above.**

Make checks payable to: WMMSA

Eligibility: Only swimmers who have a current USMS membership will be allowed to compete. A Photocopy of your 2012 Membership must accompany your entry. If you're not currently a member, apply now on the web at <http://registration.usms.org/> and show your card/registration number when you arrive.

Seeding: Each event will be seeded by the pre-entered seedtime of each swimmer; with the slower heats first. The meet will be deck seeded according to times submitted, regardless of age and gender. No time (NT) will be seeded in the slower heats

Check-In: Swimmers who have pre-registered must check-in for ALL events.

Results: Results will be posted in the hall, and on the Michigan Masters website at the end of the meet.

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MEET ENTRY FORM

Name: _____ Date of Birth: _____ Sex: _____

Address: _____ Email: _____

City/State: _____ Zip: _____

USMS#: _____ Phone#: _____

<u>Event #</u>	<u>Seed Time</u>	<u>Event Description</u>
1	_____	1000 Freestyle
2	_____	200 Butterfly
	Intermission	
3	_____	200 Medley RELAY
4	_____	200 Freestyle
5	_____	200 Individual Medley
6	_____	50 Freestyle
7	_____	100 Backstroke
8	_____	200 Breaststroke
9	_____	50 Butterfly
10	_____	50 Backstroke
	Intermission	
11	_____	100 Individual Medley
12	_____	100 Freestyle
13	_____	100 Breaststroke
14	_____	100 Butterfly
15	_____	200 Backstroke
16	_____	50 Breaststroke

I, the undersigned participant, intending to be legally bound, hereby certify that I m 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 or 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 RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITES, MEET SPONSORS, MEET COMMITTEES OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS. (rule book article 204.1)

Emergency Contact Person: _____

Emergency Contact Phone #: _____

Signature: _____

Date: _____