

# Hawkeye Masters Swim Club MASTERS SWIM MEET

Sanctioned by Iowa LSMC for USMS, Inc. - Sanction Number: 400702

University of Iowa Field House Pool- Melrose Ave/Grand Ave. Iowa City  
Sunday- February 18, 2007 Warm-Ups: 8 A.M. Meet: 9 A.M.

Entry Deadline: Entries MUST be received by Friday, February 16, 2007. "Deck" or "late" entries will be accepted up to 8:45 A.M. on Sunday morning but may be placed in slower heats.

Entry Fee: \$14.50 + 50 cent "splash fee"(\$15.00 total) or \$18.00 total for "late" entries.

Mail Entries to: Kelsey Albair Univ of Iowa, Rec Services/Aquatics, Iowa City, IA 52242  
USMS REGISTRATION FORMS WILL BE AVAILABLE AT THE MEET

Further Info: Call Kelsey at 319-384-2914 or Wayne at 319-337-4268

Age Groups:(circle one) 19-24, 25-29,30-34,35-39,40-44,45-49,50-54,55-59,60-64,65-69,etc..

Age Group for relays: 19+, 25+,35+,45+, 55+,65+

- |                                 |                                |
|---------------------------------|--------------------------------|
| 1. 200 Medley Relay M/F _____   | 10. 50 backstroke _____        |
| 2. 200 Freestyle _____          | 11. 100 Butterfly _____        |
| 3. 200 I.M. _____               | 12. 500 Freestyle _____        |
| 4. 50 Freestyle _____           | 13. 200 Mixed Free Relay _____ |
| 5. 100 Backstroke _____         | 14. 50 Breastroke _____        |
| 6. 100 Breastroke _____         | 15. 100 Freestyle _____        |
| 7. 2X 50 Mixed Free Relay _____ | 16. 200 Backstroke _____       |
| 8. 50 Butterfly _____           | 17. 100 I.M. _____             |
| 9. 200 Breastroke _____         | 18. 1650 Freestyle _____       |
- ( 5 event limit plus relays)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Birth Date \_\_\_\_\_  
City, State,Zip \_\_\_\_\_ Age \_\_\_\_\_ Gender: M/F

ATHLETE'S RELEASE; I the undersigned participant, intending to be legally bound, hereby certify 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 or death, and agree to assume all of the 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 FACILITIES, 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.

Signature \_\_\_\_\_ date \_\_\_\_\_  
USMS Number \_\_\_\_\_