



# Newburgh Sea Creatures

## Swim the Moat Open Water Simulation

### June 5, 2011

- Sanction:** Sanctioned by Indiana LMSC, Sanction #
- Location:** Castle High School Natatorium, 3344 Indiana 261, Newburgh, IN 47630. The pool is located on the north side of the school and has a separate entrance.
- Facility:** The Natatorium will be set as an open water simulation with a 140m course using buoys to mark the turns. The pool is a new facility with portable bleacher seating on deck for participants and spectators, and additional seating for spectators in the gallery.
- Schedule:** Sunday, warm-ups will begin at 8:00 AM CDT with the meet starting at 9:00 AM CDT.
- Meet Conduct:** 2011 USMS rules will govern the meet
- Eligibility:** All entrants must be registered with United States Masters Swimming, Inc. All swimmers must include a copy of their USMS registration card with this entry form. You may purchase a one-event USMS membership for this event with the attached form. Your age as of December 31, 2011 will determine your age for the meet.
- Age Groups:** 18-24, 25 – 29, 30 – 34, etc.
- Entry fee:** The entry fee is \$25.00 per individual and \$60.00 per relay. Entries postmarked after 5/16/11 will be \$35.00 per individual and \$85.00 per relay. Deck entries will not be available for this event. Please make checks payable to Newburgh Sea Creatures and note “Swim the Moat” on your check. Swimmers registering for both Saturday and Sunday events will receive a \$5 discount on Sunday's entry fee.
- Post-Race:** Lunch will be provided to all participants after the event. Guests may purchase lunch for \$6.00 each. Please note how many guests will be staying for lunch on your entry form.
- Relays:** Relays may be composed of up to 3 swimmers. Relays will swim concurrently. Each relay member must submit a registration form with a signed waiver and if necessary a 1-event USMS registration. Please include all relay members' names on each form and make sure one check is submitted for the relay.
- Deadline:** Entries must be postmarked by Friday, May 20, 2011.
- Seeding:** There will be a mass start, with waves at the Meet Director's discretion. Swimmers will be seeded by 1500m/1650yd time.
- Caps:** Swimmers will be required to wear provided event caps with their race number.
- Wetsuits:** Wetsuits are not permitted for this event.
- Awards:** Awards will be given overall man, overall woman, and overall relay.
- Results:** Complete results will be posted on the state masters website. [www.grinswim.org](http://www.grinswim.org).
- Mail entries to:** Heather Bowling, Meet Director, 4966 Tippecanoe Dr., Newburgh, IN 47630.

Newburgh Sea Creatures "Swim the Moat"  
Open Water Simulation Entry Form

Sanctioned by Indiana LMSC for USMS, Inc. #

Individual  Relay

Name \_\_\_\_\_

Relay Member (2) \_\_\_\_\_ Relay Member (3) \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_

1500m \_\_\_\_\_ /1650yd \_\_\_\_\_ Seed Time \_\_\_\_\_

USMS Membership Number \_\_\_\_\_ OR One-event registration enclosed

**Fees**

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Event Registration	Individual \$25 (\$35 after 5/16/11)	_____
	Relay \$60 (\$85 after 5/16/11)	_____
	Discount for Saturday registration -\$5	_____
	Guest Lunch \$6/each _____ @ \$6	_____
	Total	_____

**Release**

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**RELEASE FROM LIABILITY:** 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 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 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. (Rule Book Article 204.1)

Signature \_\_\_\_\_ Date \_\_\_\_\_



## One Event Registration Form

Register with the same name you will use for competition. ***Please Print clearly.***

Last Name		First Name		MI
Street Address				
City/State/Zip			Phone	
Date of Birth (mm/dd/yy)	Age	Sex (circle) M    F	E-mail address	
Event Name:			Today's Date ( <b>required</b> )	

WAIVER: 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 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 FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITES. In addition, I agree to abide by and be governed by the rules of USMS.

**Signature (*required*):** \_\_\_\_\_

**Make a check for \$ \_\_\_\_ payable to:** (\$12 of the fee goes to USMS, \$\_\_ to the LMSC)

**Meet Director, please mail check  
and completed form to:**

Syd Latina  
5463 Hollow Oak Ct #1B  
Indianapolis, IN 462503