



## ***Lakeside Masters Spring SCY Mini Meet***

***Sunday, April 14, 2024***

SANCTIONED BY THE KENTUCKY LMSC FOR UNITED STATES MASTERS SWIMMING, INC  
SANCTION NUMBER **XXX-XXXX**

<b>EVENTS:</b>	<u>Event #1</u>	400-yard freestyle relay
	<u>Event #2</u>	200-yard backstroke
	<u>Event #3</u>	100-yard butterfly
	<u>Event #4</u>	200-yard breaststroke
	<u>Event #5</u>	50-yard freestyle
	<u>Event #6</u>	100-yard individual medley
	<u>Event #7</u>	50-yard butterfly
	<u>Event #8</u>	200-yard freestyle
	<u>Event #9</u>	400-yard individual medley
	<u>Event #10</u>	400-yard medley relay

**SPONSORED BY:** Lakeside Masters Swim Team

**LOCATION:** Lakeside Swim Club, 2010 Trevilian Way, Louisville, KY 40205-2142  
502.454.4585, [www.lakesideswim.com](http://www.lakesideswim.com)

**POOL:** 8-lane, 25-yard competition and 3-lane, 20-yard warm-up/cool-down pools with non-turbulent lane dividers. The primary timing system will be semi-automatic (Colorado Timing Systems). Times can be submitted for world records, USMS records, and USMS Top Ten consideration. The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1, but as a bulkhead course, is subject to length confirmation. Eligibility of times for USMS Top Ten and records will be contingent upon the verification of bulkhead placement.

<b>SCHEDULE:</b>	Doors open	7:00 a.m.
	Competition pool warm-ups:	7:15 - 7:55 a.m.
	Meet start:	8:00 a.m.
	Meet conclusion:	11:00 a.m. or earlier

**BREAKS:** 5-minute breaks may be taken in between events, at the discretion of the Meet Referee, in order to allow athletes to rest in between multiple events in a row.

<b>ELIGIBILITY:</b>	<p>All swimmers must have an active registration with U S. Masters Swimming at the time of registration. No exceptions. Each swimmer is responsible for their proof of USMS registration and may be required to show it upon request.</p> <p><b><u>SWIMMERS MUST VERIFY THEIR USMS MEMBERSHIP DURING ONLINE &amp; DECK REGISTRATION.</u></b> Deck entry forms should display your name and USMS number as it appears on your registration records with USMS. All swimmers shall represent their USMS Club and not their Workout Group.</p>
<b>AGE</b>	<p>The age reported on your entry form must reflect your age as registered with USMS. A swimmer's age on April 14, 2024 determines their age for the meet.</p>
<b>ONLINE ENTRY:</b>	<p>Online entry via Club Assistant is available:</p> <p><a href="https://www.clubassistant.com/club/meet_information.cfm?c=1282&amp;smid=18478">https://www.clubassistant.com/club/meet_information.cfm?c=1282&amp;smid=18478</a></p> <p>Online entries will be accepted until <b>Saturday, April 13 at 12:00 p.m. EDT.</b></p>
<b>MEET ENTRY DEADLINE &amp; DECK ENTRIES:</b>	<p>The meet entry deadline is <b>Saturday, April 13, 2024 at 12:00 p.m. EDT.</b></p> <p>Paper deck entries for <b><u>all events</u></b> will be accepted until <b>Sunday, April 14, 2024 at 7:30 a.m. EDT</b> provided there is room available. Any entry received after the deadline will be considered a deck entry and will be placed in the meet in the order it was received. There is a \$10 surcharge for all deck entries.</p>
<b>MAXIMUM ENTRIES:</b>	<p>All swimmers are eligible to swim a maximum of 6 individual events for the entire meet, plus relays.</p>
<b>EVENT ENTRY LIMITS:</b>	<p><b><u>RELAY EVENTS #1 AND #10, THE 200-YARD MEDLEY AND FREESTYLE RELAYS, ARE LIMITED TO THE FIRST 16 ENTRIES.</u></b></p> <p><b><u>INDIVIDUAL EVENTS #2-8 WILL BE LIMITED TO THE FIRST 48 ENTRIES.</u></b></p> <p><b><u>INDIVIDUAL EVENT #9, THE 400-YARD INDIVIDUAL MEDLEY, WILL BE LIMITED TO THE FIRST 16 ENTRIES.</u></b></p>
<b>RELAY ENTRY:</b>	<p>Relay teams may be entered as MEN, WOMEN, or MIXED. Teams of all types will be seeded together in the same heats and scored separately. A swimmer may not swim on both a mixed and a same-sex team in the same event. All relays will be deck seeded. Relay cards are available <a href="#">here</a> and may be picked up from the Administrative Referee by a coach or USMS club representative. Each card shall include each swimmer's info in order swum on the relay; first name, last name, age, and sex. The total age of the four relay team members shall determine the age group in which the relay competes. There shall be no "exhibition" relay swims.</p>
<b>RELAY CARD SUBMISSION:</b>	<p><b><u>Relay cards for Event #1 should be returned to the Administrative Referee no later than 7:30 a.m. Relay cards for Event #10 should be returned to the Administrative Referee no later than the conclusion of event #5.</u></b></p>
<b>LANE ASSIGNMENTS:</b>	<p>The meet will be seeded by the pre-entered seed time of each swimmer or relay with the <b><u>SLOWEST HEATS FIRST.</u></b> Proof of time may be requested. A seed time</p>

of no time (NT) will be seeded in the slower heats. Swimmers will be seeded according to time, regardless of age/gender. **Final heat and lane assignments will be posted by 7:55 a.m.** at the venue on the day of the meet. Swimmers are responsible to report to the blocks when their heat is called.

**PSYCH SHEET:** A preliminary psych sheet will be posted online by Saturday, April 13, 2024 2024 by 1:00 p.m. EDT. at [www.lakesideswim.com/teams/masters-swim-team/](http://www.lakesideswim.com/teams/masters-swim-team/)

**SPLIT REQUESTS:** Swims that meet the requirements of USMS Rule 105.2.2, lead-off splits for relays, will be submitted to USMS for all lead-off swimmers.

Splits from any event in the meet that meet the requirements of USMS Rule 10.5.2.2 **for requested distances only** will be submitted to USMS. Split notification forms are available online [here](#) and must be submitted to the Meet Director via email prior to the day of the meet or to the Administrative Referee on the day of the meet. There will be copies available at the event.

**ENTRY FEES:** \$10 per swimmer (entries received before 12:00 p.m. 4/13/24)  
\$20 per swimmer for deck entries (entries received after 12:00 p.m. 4/13/24)  
**Cash/check made payable to Lakeside Masters only.**

**WARM-UP PROCEDURE:** Swimmers must enter the pool feet-first in a cautious manner. Diving shall be permitted only from the blocks in the designated sprint lane during the warm-up period. No diving in the 20-yard warm-up pool.

**PROTESTS:** Any protest concerning, eligibility, entries, seeding, or final results will be addressed to the Meet Director or Referee. The protest shall be made by the team representative only. (USMS rules 102.14).

**RESULTS:** Results will be emailed to participants and posted online at: [kylmsc.org/results](http://kylmsc.org/results) and [lakesideswim.com/teams/masters-swim-team](http://lakesideswim.com/teams/masters-swim-team) following the meet.

**FACILITY RESTRICTIONS:** Lakeside is a smoke and tobacco-free facility. Alcoholic beverages, glass containers and cans are prohibited. Lakeside is closed to its members and guests during this meet. Swimmers, volunteers, and spectators must sign in upon entering the facility.

**PARKING:** Parking is restricted to street parking only.

**VOLUNTEERS NEEDED:** Volunteer timers are needed. You can sign up online here: <https://www.signupgenius.com/go/10C094BABAE2DA7F4C16-48476037-lakeside>

**MEET DIRECTOR:**

**WILLIAM KOLB**  
2010 TREVILIAN WAY  
LOUISVILLE, KY 40205  
w. 502-454-4585 x 231  
e. [wkolb@lakesideswim.com](mailto:wkolb@lakesideswim.com)

**MEET REFEREE:**

**MARY GRAVES**  
2010 TREVILIAN WAY  
LOUISVILLE, KY 40205  
w. 502.454.4585 x 225  
e. [mtgraves@lakesideswim.com](mailto:mtgraves@lakesideswim.com)



**Lakeside Masters Spring SCY  
Mini Meet — 4/14/24**

**ENTRY FORM -- PLEASE PRINT**

**NAME:** \_\_\_\_\_ **USMS #:** \_\_\_\_\_  
(Please print this info as it appears on your USMS registration)

**DATE OF BIRTH:** \_\_\_\_\_ **AGE ON 12/31/24:** \_\_\_\_\_

**CLUB:** \_\_\_\_\_  
(All swimmers shall represent their USMS Club and not their Workout Group)

**ADDRESS:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_

**RELATION:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

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**EVENTS**

☐ #1 -- 200-yard freestyle relay  
(check if available)

☐ #6 -- 100-yard individual medley  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #2 -- 200-yard backstroke  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #7 -- 50-yard butterfly  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #3 -- 100-yard butterfly  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #8 -- 200-yard freestyle  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #4 -- 200-yard breaststroke  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #9 -- 400-yard individual medley  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #5 -- 50-yard freestyle  
seed time: \_\_\_\_ : \_\_\_\_ . \_\_\_\_

☐ #10 -- 200-yard medley relay  
(check if available)

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**FEES**

\$10 per swimmer

\$20 per swimmer for deck entries  
(received after 4/13/24 at 12:00 p.m. EDT)

Cash/check only. Payable to: **Lakeside Masters**



## 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 acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19, or other viral or bacterial infection, while participating in any of the Events, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I agree that if I have a fever, cough, feel short of breath, have any other symptoms, have knowingly been exposed to a communicable disease such as COVID-19 I agree not to participate in USMS activities for a minimum of 10 days from the date the symptoms started, until the symptoms have subsided or I have been cleared by a doctor. If I test positive for COVID-19 within 10 days following participation in a USMS activity, I will notify the USMS event director, coach or club administrator immediately.
5. 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.
6. 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 (check) M      F	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed

**Revised 04/28/2022**