



2nd Annual Chastain Park Athletic Club SCY Masters Swim Meet May 18th, 2024

www.georgiamasters.org

Hosted by: Chastain Park Athletic Club

USMS Sanction #:

Meet Director: Jeffrey Tacca and Jim King

Time: The meet will have warm-ups start at 8:00AM; meet starts at 9:00AM

Facility: Ten lane 25 yard competition pool, with at least two lanes for warm-up/warm-down. Fully automatic timing (Touch pads with backup stop watches). The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 106.2.1. Times from this competition will be eligible for USMS Top 10 considerations and records. Separate warm up lanes will be available throughout the meet.

Address: **Chastain Park Pool**, 235 Chastain Park Ave NW, Atlanta, GA 30342.

Parking: Parking is available in the Chastain Horse Park Red Lot located at 4371 Powers Ferry Rd. A map can be found by Googling "Chastain Red Lot". The pool is a short walk down the hill on Elliot Galloway Rd.

Charity: Entering this meet will help support a great cause. A portion of the proceeds will be donated to Swim Across America. Additional donations can be made at www.swimacrossamerica.org.

Social: A social after the meet is planned. Additional details will be sent prior to the meet.

Eligibility: Open to all 2024 registered United States Masters Swimming (USMS) members 18 years or older as of May 18, 2024. **USMS REGISTRATION IS REQUIRED.** If you are not registered, your application can't be accepted at the meet. **Please include a copy of your USMS card with your registration.**

Rules: 2024 USMS rules apply.

Events: Swimmers may enter up to five individual events.

Timing: The primary timing system will be automatic timing. Times from this competition will be eligible for USMS records and Top 10 consideration.

Scoring: This meet will not be scored

Fees: \$55 must be received by deadline as described below. Entries received after deadline and deck entries will be assessed a \$10 late fee. Make checks payable to Chastain Park Athletic Club

Deadline: Paper entries must be received at **5520 Glen Errol Rd, Atlanta, GA 30327** by Monday, May 13th. Mailed entries received after that date along with deck entries will be assessed a \$10 late fee. No new heats will be created to accommodate late entries. Mail your entry form, copy of your 2024 USMS card, and check for \$55.00 payable to Chastain Park Athletic Club to Jeffrey Tacca 5520 Glen Errol Rd. Atlanta, GA 30327

Information: Jeffrey Tacca, 404-806-0704, jalantac@yahoo.com.

Seeding: All events except for the 500 Free will be seeded in advance and run slowest to fastest. **Men and Women will be seeded together based on time.** The 500 Free will be run fastest to slowest, and will be seeded following the 8:40AM close of positive check-in. 500 Free swimmers must check in to compete.

Deck Entries: Deck entries will be accepted on the day of the meet until 15 minutes prior to the start of the meet. There will be an addition fee of \$10 for deck entries.
Deck adds will try to be accommodated within existing seeded heats.

On-line Entry: Register online at: _____
Entry deadline is Tuesday, May 14th at midnight.

Relays: Relays will be deck-seeded and relay heat/lane assignments posted at the meet. Psych sheets will be posted at www.georgiamasters.org around May 16th (depending on the number of late entries being processed).
Entries for events 9-11 will be due at 10:30PM. Entries for events 20-22 will be due at 12:00PM (at the meet).
All relay swimmers must be registered members of the same team. Mixed relays must be comprised of 2 Men and 2 Women belonging to the same team. There will be no exceptions to this rule. All relay entries will be verified prior to seeding.

Include a copy of your USMS Card!

Last Name:		First Name:		Middle Initial:
Date of birth:	USMS#:	Team/Club Affiliation (NOT GAJA):		
Gender:	Email address:			

Circle the event number, and provide your best SCY time for each event you plan to enter. Maximum of 5 individual events per day. **500 Free limited to the first 16 entries.**

Warm ups 8:00AM Meet Starts 9:00AM					
#	EVENT	Time (00:00:00)	#	EVENT	Time (00:00:00)
1	500yd Freestyle		12	200yd Individual Medley	
2	50yd Breaststroke		13	50yd Butterfly	
3	100yd Backstroke		14	100yd Freestyle	
4	200yd Butterfly		15	200yd Breaststroke	
5	50yd Freestyle		16	50yd Backstroke	
6	100yd Breaststroke		17	100yd Butterfly	
7	200yd Backstroke		18	100yd Individual Medley	
8	25yd Choice		19	200yd Freestyle	
10 Minute Break			10 Minute Break		
9	Men's 200yd Medley Relay		20	Men's 200yd Free Relay	
10	Women's 200yd Medley Relay		21	Women's 200yd Free Relay	
11	Mixed 200yd Medley Relay		22	Mixed 200yd Free Relay	

Payment Info:

Meet Entry Fee:

\$55.00

Make Checks Payable to: **Chastain Park Athletic Club**

Mail to: Jeffrey Tacca 5520 Glen Errol Rd. Atlanta, GA 30327

Paper Entry must be received by Monday May 13th, 2024

Online entry:

Questions? Email jalantac@yahoo.com

Must sign USMS Liability Release on Back of Entry

**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 (circle) M F	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed