



O*H*I*O MASTERS 2024 PENTATHLON (SCY) SWIM MEET
AKRON GENERAL HEALTH & WELLNESS CENTER - NORTH
4300 Allen Road, Stow, Ohio 44224
Sunday, November 3, 2024
USMS SANCTION: # 184-S003

- DATES** Sunday, November 3, 2024 - Warm-ups will start at 9:00 a.m. **Deck entries will only be accepted for open lanes. This is a pre-seeded meet.** Meet Starts at 10:00 a.m.
- POOL** The Akron General natatorium is a premier facility built in 2007. The pool has six lanes (25 yards) with anti-turbulent lane lines along with a spa and leisure pool. It is used by the Stow-Munroe Falls High School Swim Team along with the O*H*I*O Masters Akron General workout group. Five of the six lanes will be used for the meet with the sixth lane available for continuous warm-up and cool down. The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 106.2.1. The primary timing system will be a Colorado 5 automatic timing system with touchpad finishes. Times may be submitted for USMS records and USMS Top 10 times.
- LOCATION** The Akron General natatorium is part of a state of the art, 96,400 square-foot fitness and health center.
- Directions from Route 8 South: Traveling on Route 8 South, exit at E Steels Corners Road. Take a left and go over the bridge. Turn left on Allen Road. The Health & Wellness Center is at 4300 Allen Road.
- Directions Traveling on Route 8 North: Exit at E Steels Corners Road. Take a right and turn left on Allen Road. The Health & Wellness Center is at 4300 Allen Road.
- Directions from 77 South/North: Traveling on 77, merge onto Route 8 North. Exit at E Steels Corners Road. Take a right and turn left on Allen Road. The Health & Wellness Center is at 4300 Allen Road.
- ELIGIBILITY** U.S. Masters Swimming 2024 rules will govern conduct of the meet. Because of insurance requirements, all swimmers must be registered with U.S. Masters Swimming. The USMS Release of Liability must be signed electronically during online meet entry. **NOTE: Mail in entries will not be accepted for this meet.** Swimmers may swim only 5 individual events. Only swimmers entered in the meet can participate in relays. There is a "relay only" entry fee option, which is \$10 and can be entered on-line or deck entered the day of the meet.
- DEADLINES** **Registration must be completed online on ClubAssistant.com.** Online entries will close at **11:59 p.m. on Wednesday, October 30, 2024.** Deck entries must be in hand at the Admin Desk by 9:30 a.m. on the day of the meet. See additional information on deck entry restrictions in the "Deck Entries" section below.
- ENTRY FEES** Early Entry Fee is \$35.00 and ends at 11:59PM on October 20, 2024
Regular Entry Fee is \$45.00 and begins at 12:00AM on October 21, 2024
All Deck Entries (see below for deck entry restrictions) are \$50.00
"Relay only" entries can be done online or deck entry. Fee is only \$10.00
- USMS Members age 80 and older may enter the meet online for free. The Club Assistant program will determine your age during registration. No special code is required at checkout.
- Online entries are paid by credit card to ClubAssistant.com and your credit card will show a charge by "OHIO MASTERS" for this swim meet.
- DECK ENTRIES** All of the meet events will be pre-seeded before the meet to ensure timely functioning of the meet and so that swimmers can verify heat and lane assignments when they arrive at the pool. Deck entries will only be available for an event which has an empty lane as seeded when you arrive at the pool. Deck entries

will be entered as no time entries and must be in hand no later than 9:30 a.m. at the Admin Desk for the meet. Swimmers, please scratch any events you do not intend to swim during check-in so that deck entrants may use open lanes.

AGE Age of the competitor on November 3, 2024 will determine age group. Age groups are: 18-24, 25-29, 30-34,..., 80-84, 85-89, etc. For relays, age group is determined by the age of the youngest swimmer: 18+, 25+, 35+, 45+, etc. The relays can be swum with teams of 4 women, 4 men, or mixed (exactly 2 men and 2 women). Each relay team must be composed of members of the same USMS club. Unattached members may not enter relays.

AWARDS To be eligible for the pentathlon award, a swimmer must compete in all 5 of the "mini" pentathlon, all 5 of the "maxi" pentathlon or all 5 of the "Freestyle" pentathlon events. There will be a pentathlon award given for each age and gender group based on a total time in the 5 events. Individual event awards: First-place medal or ribbon, as well second and third place ribbons are available. Relays: first, second, and third-place ribbons. Results will be posted on www.ohiomasters.com usually within a day or two and on "usms.org" as well as Swim Phone shortly after the meet.

SEEDING Heats will be formed by submitted times, regardless of age/sex, and progress from fast to slow to No Time.

ORDER OF EVENTS This meet is designed to be a Pentathlon Meet with 3 options of Events for a swimmer to choose from:
Option 1 is the "Mini-Pentathlon", 50's of each stroke and a 100 yard IM
Option 2 is the "Maxi-Pentathlon", 100's of each stroke and a 200 yard IM
Option 3 is the "Freestyle Pentathlon", swim all 5 of the freestyle events scheduled for the day.

Swimmers who desire to swim 5 events of their own choosing and not participate in the pentathlon competition are welcome to attend this meet as well. Simply enter the events you wish to swim with an upper limit of 5. Please realize however, that the order of events for this meet was drafted to accommodate the pentathlon competitors. Also, please note the scheduled breaks in the meet.

All relays will be entered by relay card submission to the Admin Desk by 11:00 a.m. on the day of the meet. Relays will be men's (M), women's (W) or mixed with exactly 2 men and 2 women (X) and will be swum together in a single heat indicated in the list of events below

Order of Events
All Individual Events are Mixed Men and Women

1. 500 Freestyle
2. 200 Individual Medley
3. 100 Individual Medley
4. 25 Freestyle (**a 15 minute break follows this event**)
5. 100 Butterfly
6. 50 Butterfly
7. 200 Freestyle
8. 50 Backstroke
9. 100 Backstroke (**a 15 minute break follows this event**)
10. 50 Freestyle
11. 100 Breaststroke
12. 50 Breaststroke
13. 100 Freestyle (**a 10 minute break will follow this event**)
14. 200 Medley Relay (M, W, and X)
15. 400 Medley Relay (M, W, and X)

SOCIAL A post-meet social is scheduled and information will be provided at a later date.

MEET DIRECTOR Mark Marshfield: Contact at pzsdad@aol.com.

WAIVER The waiver document is printed below for review by prospective participants.
Sanctioned by Lake Erie LMSC for USMS, Inc. # **184-S003**



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/or 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, including the [Code of Conduct](#) and any safety regulations established by USMS. 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

