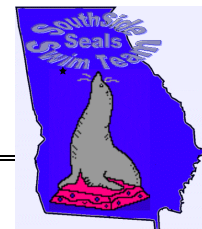




24th Annual Georgia Masters SouthSide Pentathlon Swim Meet

Saturday, September 6, 2025
Warm-ups 10:30 am Meet Starts 11:00 am



Sanctioned by GA-LMSC for USMS, Inc.: Sanction #**455-S008**

Hosted by SouthSide Seals Swim Team

Meet Director – Rob Copeland

Meet Referee – Nancy Harmon

- Facilities:** **Kedron Aquatic Center** - 202 Kedron Drive, Peachtree City, GA 30269
Eight lane – 25 yard pool – competition pool, with at least 2 for warm-up/warm-down lanes. Semi-automated timing (automated start, push button finish). 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. Times from this competition will be eligible for USMS Top 10 considerations, but not for world or USMS records.
- Directions:** From Atlanta – From 1-85 take Exit #61 (GA-74) south, towards Peachtree City. Go 8 miles to Kedron Drive. Turn Left on Kedron Drive, then 3rd left (Fieldhouse/Aquatic Center).
- Eligibility:** Open to all 2025 registered United States Masters Swimming (USMS) members 18 years or older as of September 6, 2025.
- Rules:** 2025 USMS rules apply.
- Entries:** Maximum of five individual events. You may enter any events you choose. However, to be eligible for one of the 3 pentathlons, you must enter as follows:
Sprint Pentathlon – 50 Fly, 50 Back, 50 Breast, 50 Free, plus 100 IM
Middle Distance Pentathlon – 100 Fly, 100 Back, 100 Breast, 100 Free, plus 200 IM
Iron Man Pentathlon – 200 Fly, 200 Back, 200 Breast, 200 Free, plus 400 IM
- Deadline:** On-line entries close 11:59PM September 4th. Paper entries must be received by September 3rd. Mail your entry form, copy of your 2025 USMS card, and check for \$40.00 payable to Karol Welling to:
Deck Entries will be accepted up until the start of the meet, at a fee of \$50.00. Deck entrants will be seeded into open lanes of existing heats.
- Information:** Contact Rob Copeland – Phone: (404) 667-7902 E-Mail: rob_copeland@comcast.net
- Seeding:** All events are pre-seeded and timed finals. Heats are seeded and swum from slowest to fastest, with men and women seeded together.
- Awards:** Awards for 1st through 3rd places by age group and men and women for individual events. Men and Women Pentathlon winners (lowest cumulative time for the 5 events) in each age group and for each Pentathlon distance (Sprint, Middle Distance & Iron Man) receive trophies!
- Fees:** **\$40.00 - Individual event fees must accompany entries and are non-refundable. Make checks payable to Karol Welling. Deck entrant fees are \$50.00.**
- Warm-Up:** The pool will be available for warm-up from 10:30 to 11:00 am. Warm-up/warm-down lane(s) will be available during the entire meet. Warm-up diving permitted ONLY in designated 1-way sprint lanes.
- Social:** A social gathering and the Georgia LMSC Annual Meeting will follow the meet. The social is free to all meet entrants and \$5.00 for each non-entrant. Last year, everyone had a great time, so don't miss out. Details will be available at the meet.

On-line Entry: https://www.clubassistant.com/club/meet_information.cfm?c=2278&smid=20157

Rob Copeland
319 Chestnut Oak Dr.
Peachtree City, GA 30269

2025 Georgia Masters – SouthSide Pentathlon Swim Meet

September 6, 2025

First Name _____ Last _____

Gender _____

Date of Birth _____

USMS # _____

Club/Chapter _____

Address _____

City/State/Zip _____

Telephone _____

E-Mail _____

Georgia Masters
membership will be
verified against our
registration files. All other
Masters please attached a
copy of your 2025 USMS
membership Card here.

REMEMBER:

- ☐ Complete information above and attach a copy of your USMS card (above)
or enter on-line at https://www.clubassistant.com/club/meet_information.cfm?c=2278&smid=20157
- ☐ Sign and Date the Liability release (next page)
- ☐ Include a check for **\$40.00 (\$50.00 for deck entry)**, payable to Karol Welling
- ☐ Plus \$5.00 for each additional social attendee
- ☐ Mail to **Rob Copeland; 319 Chestnut Oak Drive, Peachtree City GA 30269**

Event #	Distance	Stroke	Group	Seed Time (or NT)
1	400	IM	Iron Man	____:____.____
2	500	Free	Non-Pentathlon	____:____.____
3	100	Fly	Middle Distance	____:____.____
4	50	Back	Sprint	____:____.____
5	200	Free	Iron Man	____:____.____
6	200	IM	Middle Distance	____:____.____
7	50	Fly	Sprint	____:____.____
8	200	Breast	Iron Man	____:____.____
9	100	Free	Middle Distance	____:____.____
10	100	IM	Sprint	____:____.____
11	200	Back	Iron Man	____:____.____
12	100	Breast	Middle Distance	____:____.____
13	50	Free	Sprint	____:____.____
14	200	Fly	Iron Man	____:____.____
15	100	Back	Middle Distance	____:____.____
16	50	Breast	Sprint	____:____.____

- Circle the Event # and enter your yards seed time or NT for no time.
- Limit of five individual events.
- Warm-up 10:30AM
- Meet starts 11:00 AM
- Social and Georgia LMSC Annual Meeting immediately following the meet

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); Grown-Up Swimming meets or workouts; 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, viral or bacterial infection including but not limited to COVID-19, 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 and acknowledge that violations of the code of conduct may result in disciplinary action up to and including suspension of USMS membership.
4. 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, contractors, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USA Swimming Foundation; Grown-Up Swimming, LLC; 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.
5. 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.

Revised 10/30/2024

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