

ATAC Summer 2024 Masters Meet
Trousdell Aquatic Center - Saturday, July 27, 2024
Sanctioned by the Florida LMSC for USMS, Inc., Sanction 144-S015

DATE & TIME: Saturday, July 27, 2024. Warm up will start depending on the end time for the earlier, USA Swimming meet. Meet start is 2:00 pm pending previous session end time.

FACILITY: Trousdell Aquatic Center, 298 John Knox Rd, Tallahassee, FL 32303. Short Course Yards (25-yard) meet, with 16 lanes available for warm up and 8 lanes available to swim down between events.

Eight (8) lanes will be used for competition. Meet management has the right to condense lanes based on number of entries and timeline.

COURSE: 25-yard pool

POOL LENGTH CERTIFICATION: 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.

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

RULES & ELIGIBILITY: Current USMS rules will govern the meet. All participants must be age 18 or older as of the last day of the meet and be currently-registered members of U.S. Masters Swimming. Foreign swimmers must provide proof of current membership in their country's Masters Swimming governing body.

AGE-DETERMINING DATE: The swimmer's age group is determined by their age on the last day of the meet.

ENTRY PROCEDURE:

- 1) Look up your 2024 USMS Member ID here: <https://www.usms.org/reg/members/>
- 2) Complete the **EVENT ENTRY DOCUMENT at this link**
[https://docs.google.com/forms/d/e/1FAIpQLSd0A-c9xk9ZjwAvNb_Jq690BFHei41CdTPoU_OSiNd63z57HQ/viewform?vc=0&c=0&w=1&flr=0]
- 3) **Print and sign the USMS liability waiver** and bring it to the meet, or be prepared to sign it at the meet upon arrival
- 4) Bring your \$30 payment to the meet

ENTRY FEES: Entry fee is a flat \$30 for facility fee, entry surcharge, and up to 4 individual events. Relays are no additional cost. Entry fees are NOT REFUNDABLE.

ENTRY LIMITS: There is a limit of 4 individual events for the Meet. This does not include Relays. Deck Entries and Day of Entries are not allowed.

ENTRY DEADLINE: July 23, 2024

HEAT SHEETS: Will be available online before the meet.

SEEDING: All events will be entered and swum as "No Time" (NT).

SCRATCHES: No penalty for scratching on the block. No refunds for scratched events.

RELAYS: Relay teams may consist of either four men or four women or two men plus two women (Mixed), all registered with the same USMS club. Relays can be deck entered the day of the meet. No extra cost for Relays. Check-in with meet management to declare intention to swim relays prior to 30 minutes before the meet begins.

HOSPITALITY: There is no concession area, but water coolers will be available.

AFTER MEET SOCIAL: TBD

MEET MANAGER: Edward Von Hertsenber, eddievonh@swimatac.com

MEET REFEREE: Dan McDaniel

CAMERA ZONES: Per Florida Swimming Rule 223.13, Meet Management shall designate and inform the public of "Camera Zones" at each swim meet where both still photography and video photography of a race or a competitor in a race may be taken. Acceptable "Camera Zones" may include, but are not limited to the side Courses of a pool, team gathering areas, concession area, turn end of competition course when not in use as a "start end", etc. Meet Management shall also designate "Non-Camera Zones." Under NO circumstances will Camera Zones include the area Immediately behind the starting blocks at either end of the racing course(s) while they are in use for "racing starting purposes" during competition and warm-ups, locker rooms, restrooms, or any other dressing areas. Any individual failing to abide by this rule could be subject to the Florida Swimming Code of Conduct violation as defined in Rule 239.2.

ORDER OF EVENTS:

| WOMEN'S EVENT #: | EVENT : | MEN'S EVENT #: |
|------------------|---------------------------|-----------------------------|
| 1 | 200 Freestyle | 2 |
| 3 | 100 Butterfly | 4 |
| 5 | 50 Backstroke | 6 |
| 7 | 100 Breaststroke | 8 |
| 9 | 50 Freestyle | 10 |
| 11 | 200 Mixed Freestyle Relay | (Men's or Women's or Mixed) |
| 12 | 50 Butterfly | 13 |
| 14 | 100 Backstroke | 15 |
| 16 | 50 Breaststroke | 17 |
| 18 | 100 Freestyle | 19 |
| 20 | 200 Individual Medley | 21 |
| 22 | 500 Freestyle * | 23 |

*500 freestyle subject to condensing heats and mixing genders based on entries and Meet Management decision.

EVENT ENTRY LINK: https://docs.google.com/forms/d/e/1FAIpQLSd0A-c9xk9ZjwAvNb_Jq690BFHei41CdTPoU_OSiNd63z57HQ/viewform?vc=0&c=0&w=1&flr=0



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.

Form with fields: 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