



Michigan Masters Swimming and Dave McDill Aquatic Center Present the

Harper Creek Splash and Dash

USMS sanctioned # 193-S004

- Date: **Sunday January 22, 2023**
- Location: **Harper Creek High School, 12677 Beadle Lake Road, Battle Creek, MI 49014**
Located just off 94, exit 100 (Beadle Lake Road Exit). Go approximately 1.5 miles south on Beadle Lake road and the High School (with the blue roof) is on the right.
- Facility: The Harper Creek Aquatic Center is a newer facility that opened in January 2005. The 8-lane pool with separate diving well (which is available for warm up/down during the meet) features 8-foot wide lanes, 7-foot deep, large gutters, side step up Paragon starting blocks and a Daktronics timing system but our display board is not working at this time. There is plenty of parking and seating for spectators. Locker rooms are available and athletes should put on a lock. It would be wise to leave valuables at home and Harper Creek is not responsible for lost or stolen items. This meet will be swum as Short Course yards (SCY). 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 107.2.1.
- Meet Director: Meredith Hawkins
Email: hawkinsm@harpercreek.net
- Eligibility: Only swimmers who have a current USMS membership will be allowed to compete. This meet is in the beginning of the New Year so remember to register! If you register for USMS 48 hours prior to our meet please bring a Photocopy of your 2023 Membership. If you're not currently a member, apply now on the web at <http://registration.usms.org/reg/> Please show your card/registration number when you arrive.
- Entries: **On-Line Registration: \$35. Register Online at: www.michiganmasters.com.**
Online registration closes Friday 1/20/23, at 9:00pm.
- Times: **Deck Entry Registration: \$40. Deck entries will close at 9:30 AM.**
- | | |
|-------------------|---|
| Session I | Check in and Warm up 8:00 am-8:40 am |
| Session I | Starts 8:45 am and will consist only of the first 16 entries received for the 1000 Free. We will call if you're not in the 1,000. If not at max and you are coming early, we will allow deck entries first come basis. |
| Deck Registration | Session II only will close at 9:30 am |
| Session II | Check in and Warm up will begin when 1,000 is done -10:50 am |
| Session II | Starts 11:00 |
- Meet Snacks: Provided by the Harper Creek Swim Teams and is included in your entry fee.

All proceeds swim the meet will go towards equipment for the facility and to support the Harper Creek Swimming and Diving Teams. Please help spread the word for this meet so we can offer this meet for many years to come.

Harper Creek Splash and Dash

USMS Masters Swim Meet Sanction #193-S004

Hosted by Harper Creek High School

Name: _____ Email: _____
 Street Address: _____ City: _____ Zip: _____
 Date of Birth: _____ Phone # (____) _____
 Sex: _____ Age: _____ USMS# _____

Event #	Event	Seed Time
<i>Session I</i>	<i>Warm up 8:15 am Session Starts 9:00</i>	
1	1000 Freestyle 1 st 16 entries received are in *you will be called if you are not in **deck entries only if not at max number	
<i>Session II</i>	<i>Deck Registration closes 9:30</i> <i>Warm up 10 am Session Starts 11 am</i>	
2	100 IM	
3	200 Freestyle	
4	50 Butterfly	
5	100 Breaststroke	
6	200 Backstroke	
7	50 Freestyle	
8	200 IM	
	Intermission	
9	200 Free Relay Deck Enter during warm up & by 10:30	
10	100 Butterfly	
11	200 Breaststroke	
12	50 Backstroke	
13	100 Freestyle	
14	200 Butterfly	
15	50 Breaststroke	
16	100 Backstroke	
17	400 IM	
18	500 Freestyle	

Emergency Contact (a person who is available during the meet)

Name-_____ Phone # (____) _____ - _____

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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

Revised 04/28/2022