



## 2<sup>nd</sup> Annual New Year's Masters Invitational January 23-24, 2010

Sanctioned by Florida Gold Coast for USMS, Inc. Sanction Number 5010-001

**Location:** Plantation Aquatic Complex – 9151 NW 2<sup>nd</sup> St. Plantation, FL 33324  
Phone: 954-452-2526

**Facility:** Competition will be held in an 8-lane, 25 yard pool. Warm down space is available in an adjacent diving well as well as a second 25 yard pool. Colorado 6 timing system will be used with an 8-lane scoreboard to display results. Hy-tek Meet Manager Software will be used for the meet.

**Meet Conduct:** Current USMS rules will govern the conduct of the meet.

**Eligibility:** All competitors must hold current USMS registrations or valid travel permits or their equivalents, or have other acceptable proof of current Masters swimming registration, and must be 18 years of age or over.

**Age Groups:** Individual Events: 18-24, 25-29, 30-34, 35-39, etc. in 5-year increments.  
Relay Events: 18+, 25+, 35+, 45+, 55+, 65+, 75+, 85+, 95+, ... (10-year increments as high as is necessary). The age of the youngest relay team member shall determine the age group.

**Entry Fees:** A \$25 flat fee if received by **Wednesday, January 20, 2010**. A \$40 fee will be charged if received after January 20 (including deck entries). A fee of \$4.00 will be charged for each relay entered. **Make checks payable to PST Booster Club.**

**Entry Limit:** A maximum of 5 individual events may be swum each day. Swimmers posting entries over the entry limit will be considered as entered in the first five events.

**Seeding:** Swimmers will be seeded on the basis of submitted times regardless of age. Men and Women may be seeded together. Entrants submitting “no time” may be placed in the slowest heat for that event.

**Awards:** Individual and relay awards will be given for 1<sup>st</sup>-3<sup>rd</sup> place by gender and age group. Award sheets will also be available upon completion of the meet.

**Deck Entries:** will be accepted until 45 minutes prior to the start of each session and only in events with open lanes available. No new heats will be created. All relays will be deck entered. All deck entries will be seeded “NT”.

**Meet Director:** Tom Cuticchia, Assistant Coach, Plantation Swim Team. Meet Director reserves the right to make changes in order to run an efficient meet.

**2<sup>nd</sup> Annual New Year's Masters Invitational Entry Form**  
**Sanctioned by Florida Gold Coast for USMS, Inc. Sanction Number 5010-001**

Please Print Legibly or Type.

Name \_\_\_\_\_  
Gender \_\_\_\_\_ Birth Date \_\_\_\_\_  
Age as of Jan. 24, 2010 \_\_\_\_\_  
USMS Number \_\_\_\_\_  
Team/Club \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_\_) \_\_\_\_\_  
E-mail \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR CURRENT USMS CARD.**

Circle the event numbers in which you would like to be entered and show your seed time to the hundredth of a second. If you do not enter a time, you will be entered "NT". Limit of five individual events plus relays per day.

Saturday, January 23, 2010: Warm-up starts at 9 AM; meet starts at 10 AM

Women	Men	Event Name	Seed Time
1	2	200 Medley Relay	
3	4	400 IM	_____
5	6	50 Freestyle	_____
7	8	200 Backstroke	_____
9	10	50 Butterfly	_____
11	12	100 Breaststroke	_____
13	14	100 Freestyle	_____
15	16	200 Butterfly	_____
17	18	100 Backstroke	_____
	19	Mixed 200 Medley Relay	_____
21	22	500 Freestyle	_____

Sunday, January 24, 2010: Warm-up starts at 9 AM; meet starts at 10 AM

Women	Men	Event Name	Seed Time
23	24	200 Freestyle Relay	
25	26	200 IM	_____
27	28	50 Breaststroke	_____
29	30	100 Butterfly	_____
31	32	50 Backstroke	_____
33	34	200 Freestyle	_____
35	36	100 IM	_____
37	38	200 Breaststroke	_____
	39	Mixed 200 Freestyle Relay	_____
41	42	1000 Freestyle	_____

**Mail entries to: Tom Cuticchia, Meet Director, Plantation Swim Team, 9151 NW 2<sup>nd</sup> St. Plantation, FL 33324**

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCALS MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS.

Athlete's Signature: \_\_\_\_\_ Date: \_\_\_\_\_