



Bill Heebner Memorial
Winter Freeze Masters Meet
LUCKY LEPRECHAUN

Hosted by the Phoenixville Area YMCA (PAY) Swim Team
Sanctioned by DV-LMSC Number – #088-S001

NEW (Rescheduled) Date: Sunday, March 18, 2018
Warm-ups 10:00 A.M. Start: 11:00 A. M.

Meet Director: Sean Maher Phone 610-842-7151 mahermot@gmail.com

Location: Phoenixville Area YMCA, **400 E. Pothouse Rd., Phoenixville PA. 19460** Phone 610-933-5861

Facility: 6 lane, certified **25-meter** pool. Locker rooms - bring your own lock. Electronic timing. 6+ Lane warm-up (10:00-11:00) Myrin pool, 6 lanes (11:00-12:00) Heritage pool, 1 lane thereafter in Heritage pool. Warm-ups permitted only in designated areas. Bleacher seating.

Eligibility: This meet is open to US Masters Swimmers age 18 years or older.

Seeding: Swimmers will be seeded by time submitted, slow to fast regardless of age and sex. If time unknown, please estimate. This is a Meter Pool. Estimate meter times by multiplying SCY times by 1.11. Participants will be limited to five individual events and two relays. Relay's are women's, men's, or mixed (2 women/2 men). Relay participants must swim in at least one individual event. Ages are determined by age on 12/31/2018. Relay age group determined by total ages of swimmers

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|-------------------------|---------------------------------|--------------------------------|------------------------------------|
| Order of Events: | 1. 200 Medley Relay | 9. 100 Free | 17. 1500 Free* (positive check-in) |
| | 2. 200 Breast | 10. 200 Back | 18. 100 Back |
| | 3. 25 Freestyle | 11. 400 IM (positive check-in) | 19. 50 Fly |
| | 4. 50 Back | 12. 25 Breast | 20. 100 IM |
| | 5. 100 Fly | 13. 200 Free Relay | 21. 200 Free |
| | 6. 400 Free (positive check-in) | 14. 100 Breast | 22. 25 Back |
| | 7. 50 Breast | 15. 50 Free | 23. 400 Medley Relay |
| | 8. 200 IM | 16. 200 Fly | 24. 25 Fly |
| | | | 25. 400 Free Relay |

* Maximum of 3 heats for the 1500 Free. Please register early.

All events are timed finals. Meet will be conducted according to 2018 U.S.M.S. Rules.

Awards: Ribbons for individual 1st, 2nd and 3rd. Individual Age groups: 18-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85-90, etc. Relay age groups: 72+, 100+, 120+, 160+, 200+, 240+, 280+, 320+, etc. Awards for Team 1st, and 2nd. Awards will not be mailed.

Sanction: This is a Masters Sanctioned swim meet. All swimmers must be registered with US Masters Swimming, Inc., or must complete and pay for a One Event Registration to be eligible to swim. For USMS registration information, go to <http://www.dvmasters.org/join.php>.

The meet is being considered for **One Event Registration**. If approved, a \$15.00 fee and completion of the One Event Registration Form would be required for swimmers who are not registered for US Masters Swimming. Times swum under the One Event Registration are not eligible for USMS Top 10 or records consideration.

Final Results: Results will be posted to www.payswim.org and www.dvmasters.org. Results will also be submitted for Top Ten consideration in accordance with USMS rules. USMS registered swimmers must include with their entry a copy of their 2018 registration for Top Ten consideration.

Entry Fees: Entry fee of \$5.00 per individual event. \$8.00 for relays plus a one time surcharge of \$5.00 to cover electronic timing. No charge for heat sheets. **Use PayPal or make checks payable to: PAY Parents Aquatic Club**

Deck Entries: Deck entries will be permitted for a fee of \$10.00 per event until 10:15AM the day of the meet.



**Bill Heebner Winter Freeze Masters Swim Meet
(THIS PAGE MUST BE RETURNED WITH YOUR ENTRY)**

Entry Deadline: Entry form must be **RECEIVED by March 17, 2018**. Entries received after this date will be considered deck entries and charged \$10/event.

Entries: Fill out table below, max of 5 individual events, two relays. Entry fee = \$5.00 Ind. Event, \$8.00/relay. Relays add age group to event description. Please do not enter with "NT", estimate your times.

	Event #	Event Description	Seed Time	Entry Fee
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
		Electronic Timing		_____ \$5.00
		Total Entry =		_____

Mail or email entries to: Sean Maher, 4011 Tinker Hill Road, Phoenixville, PA 19460 or mahermot@gmail.com

Payment options:

PayPal: using this link: <https://paypal.me/pools/c/80zRlzhTdF> and click "Chip In", or

Make Check payable to: PAY Parents Aquatic Club or "PAY PAC"

Release from liability: Must be signed and dated before swimmer may compete.

Release by Participant from Liability: 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 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 THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC. THE LOCAL 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.

LAST NAME _____ FIRST NAME _____ MIDDLE _____

DATE OF BIRTH (mm/dd/yy) _____ AGE AS OF 12/31/18 _____ Sex (check) M F

STREET ADDRESS: _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____ USMS NUMBER _____

PHONE # _____ TEAM _____

EMERGENCY CONTACT: Name (print) _____ Phone Number _____

SIGNED: _____

DATE _____



**U.S. MASTERS
SWIMMING**

2018

One Event Registration Form

(COMPLETE IF YOU ARE NOT REGISTERED FOR US MASTERS SWIMMING)

Register with the same name you will use for competition. **Please print clearly.**

Last Name		First Name		MI
Street Address				
City/State/Zip			Phone	
Date of Birth (mm/dd/yy)	Age	Sex (check) M F		E-mail address
Event Name and Location Bill Heebner Winter Freeze Masters Meet, Phoenixville Area YMCA				
Signature (required)			Today's Date (required)	

Instructions:

1. Fill out both pages of this form. Page 1 is the application; Page 2 is the participant waiver. **Both pages** must be signed and dated by the participant.
2. Make check payable to: **PAY Parents Aquatic Club**
3. Fees: USMS \$ **15.00** Total
4. Meet Director should retain one copy of the signed forms for his state's applicable personal injury statute of limitations time period
5. Meet Director should mail check and completed forms (both Pages 1 and 2) to:
Janet Jastremski, Registrar
Delaware Valley LMSC
717 Willow Street, Apt. 2A
Lansdale, PA 19446

NOTE: Times swum under the one-event registration are not eligible for USMS Top 10 or records consideration.



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 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.
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.

Form with fields: Last Name, First Name, MI, Sex (check) M F, Date of Birth (mm/dd/yy), Street Address, City, State, Zip, Signature of Participant, Date Signed



Phoenixville Area YMCA
400 E. Pothouse Rd.
Phoenixville PA. 19460
Phone 610-933-5861

DIRECTIONS:

From King of Prussia/ PA Turnpike: At exit stay to the right. After the toll take the first exit onto N. Gulph road. This turns into PA Rt 23, which then goes through Valley Forge Park. After Valley Forge stay on 23 past the dam. Turn left at the light onto Whitehorse Rd. Go to the next light and then turn right onto Pothouse Rd. The Y is on the Left.

From the Schuylkill Expressway: Take I76 north to US 202 South. Proceed to US 422 west. Exit 422 west onto PA 23 West. Follow preceding directions from Valley Forge Park.

From the North: From Reading take US422 south to PA 29 south, From Bethlehem take PA 100 to Pa 29 south. Go through Phoenixville past the hospital. After passing Phoenixville High School, turn left at the light onto Pothouse Rd. The Y is on the right.

From the South: From US 202 or US 30, take PA 29 north. Go under the turnpike, over the train tracks and turn right at the light (Rt29 N). Follow this and go under a train trestle and up a hill where you'll turn right at the light onto Pothouse Rd. The Y is on your right.

From the West: Take PA 23 into Phoenixville. Go past the hospital and turn right at the first light (Sunoco Station) onto PA 29 south. Go past the school and turn left at the first light onto Pothouse Rd. The Y is on the right.