

Chehalem Short Course Yards Meet

Sanctioned by Oregon Masters Swimming, Inc. for USMS, Inc. • Sanction #370-01

Eligibility: Currently registered USMS swimmers, 18 years and older.

Unregistered swimmers must submit a 2010 registration form and fee with this form.

Hosted by: Chehalem Swim Team

DATE: Saturday January 30, 2010

Location: Chehalem Aquatic Center
1802 Haworth
Newberg, OR 97132

25 yards ~ 6 lanes competition-electronic timing
separate warm-up/down area

WARM-UPS: 8AM
MEET STARTS: 9AM

Meet Director: Kathleen Buck • Phone 503-625-5747 • e-mail kbuckcheney@comcast.net

Directions to Pool: Take I-5 (North or South) to the Tualatin/Sherwood Exit (289). Turn West onto Nyberg Road, which becomes the Tualatin/Sherwood Road. Proceed through the community of Tualatin until you reach Sherwood (5 miles). In Sherwood, immediately past the Albertson's shopping complex, take a left (South) onto Hwy 99W. Continue on 99W to Newberg. In Newberg, turn Right onto Villa Road (Walgreens will be on your left). Turn right onto Haworth, and the pool is on your right.

ALL ENTRANTS MUST SUBMIT A PHOTOCOPY OF THEIR CURRENT 2010 USMS REGISTRATION CARD WITH THIS ENTRY.

ENTRY DEADLINE: POSTMARK NO LATER THAN FRIDAY JANUARY 15, 2010

FILL IN LOWER PORTION COMPLETELY

RETURN LOWER PORTION

FILL IN LOWER PORTION COMPLETELY



NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

PHONE _____

E-MAIL _____

BIRTHDATE _____ AGE _____ SEX _____

2010 USMS # _____

USMS CLUB (OREG, SWMS, PNA, ETC) _____

AGE GROUPS: 18-24, 25-29, 30-34, ETC. UP TO 100+. RELAY AGE GROUPS: 18+, 25+, 35+, 45+, 55+, 65+, 75+, ETC. **YOU MAY ENTER A MAXIMUM OF 5 INDIVIDUAL EVENTS PLUS UNLIMITED RELAYS.** ENTER RELAYS AT THE MEET. IN EACH RELAY EVENT, RELAY TEAMS MAY SWIM DISTANCES OF 200Y, 400Y OR 800Y (800Y FOR FREE RELAYS ONLY). THE 500 & 1000 FREESTYLES & 400 IM WILL BE DECK SEEDED. *CHECK IN FOR THESE EVENTS AND FOR THE RELAYS WILL CLOSE 30 MIN. BEFORE EVENT IS TO BE SWUM.* ALL EVENTS WILL BE SEEDED SLOW TO FAST.

SATURDAY, January 30

400 IM (1) _____ : _____ . _____

50 FREE (2) _____ : _____ . _____

200 BACK (3) _____ : _____ . _____

100 FLY (4) _____ : _____ . _____

* break*

MIXED MEDLEY RELAYS (5-6)

50 BACK (7) _____ : _____ . _____

200 FREE (8) _____ : _____ . _____

100 BREAST (9) _____ : _____ . _____

* break*

FREE RELAYS (10-15)

500 FREE (16) _____ : _____ . _____

50 FLY (17) _____ : _____ . _____

200 BREAST (18) _____ : _____ . _____

100 FREE (19) _____ : _____ . _____

100 IM (20) _____ : _____ . _____

* break*

MEDLEY RELAYS (21-24)

50 BREAST (25) _____ : _____ . _____

200 FLY (26) _____ : _____ . _____

100 BACK (27) _____ : _____ . _____

200 IM (28) _____ : _____ . _____

* break*

MIXED FREE RELAYS (29-31)

1000 FREE (32) _____ : _____ . _____

"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 & 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."

SIGNATURE _____ DATE _____

MEET ENTRY FEE: \$18.00 • MAKE CHECKS PAYABLE TO OREGON MASTERS SWIMMING.
SEND FORM(S) AND FEE(S) TO: OMS DATA MANAGER, PO Box 1072, CAMAS, WA 98607-1072