

# Announcing

## 2015 Mason RAYS Masters Meet

Sunday, January 25, 2015

WARM UPS BEGIN AT 9:00am



See attached information  
or call 513-229-8555 x5510

<http://teamunify.com/ohmmr>

Mason RAYS Masters Meet  
Short Course Yards

Sunday, January 25, 2015

Sanctioned by Ohio LMSC and USMS, Inc. Sanction Number 175-S001



**HOST TEAM:** Manta Ray Masters (SWOM)

**CONTACT:** Derek Finn, Head Masters Coach, Mason Community Center  
513-229-8555 x5510  
[dfinn@masonoh.org](mailto:dfinn@masonoh.org)

**LOCATION:** Mason Community Center  
6050 Mason Montgomery Rd  
Mason, OH 45040  
513-229-8555 x5510  
513-229-8556 (fax)

**ELIGIBILITY:**

- Open to all swimmers who are registered with USMS. Each swimmer is responsible for his/her USMS card and will be required to show it upon request by officials.
- **To enter the meet, a copy of the swimmers current USMS registration card MUST accompany the entry form.**
- The meet entry form should display your registered name, number, and team name, according to your USMS card. Unattached swimmers note "UNAT." **Please print all information legibly.**
- If a swimmer is not currently registered with USMS, applications and registration fees will be taken at the meet. Only checks made out to Ohio LMSC will be accepted for USMS registration. A self-addressed stamped envelope is required for USMS registration so that cards may be mailed out after the meet.
- Swimmers and coaches *only* will be allowed on deck. Family members must remain in the viewing gallery.

**AGE:**

The age reported on your entry form must reflect your age as of 1/25/2015

**ENTRY FEES & PAYMENT:**

- A fee of \$25 will be charged for those that enter via the attached entry form. \*NOTE\* All individuals, regardless of entry method, must sign the waivers at the bottom of the entry form.
- Mail entries must be postmarked by 1/12/2015.
- A flat fee of \$40 will be charged for deck entries
- Refunds will only be issued for documented medical reasons or if the meet is cancelled.
- Registration form, copy of USMS card, and payment may be made by mail, faxed to 513-229-8556, or emailed to [dfinn@masonoh.org](mailto:dfinn@masonoh.org).
- Checks and credit card (Visa and MasterCard only) accepted.
- All checks should be made out to The City of Mason.
- Credit card numbers, with expiration date, may be used for registration.

Fax Payment to:  
513-229-8556  
Attn: Derek Finn  
Manta Ray Masters

OR

Mail Payment to:  
Attn: Derek Finn/Manta Ray Masters  
Mason Community Center  
6050 Mason-Montgomery Road  
Mason, OH 45040

**SEEDING & LANE ASSIGNMENTS:**

Each event will be seeded by the pre-entered seedtime of each swimmer, with the slower heats first (except the 1650, which will be swum fastest to slowest). The meet will be deck seeded according to times submitted, regardless of age and gender. No time (NT) will be seeded in the slower heats. Swimmers are responsible to report to the blocks on time for their appropriate heat and lane for each event. Heat and lane assignments for all events will be posted by 10:00am on the day of competition.

**STARTING  
PROCEDURE:**

**103.8.5—Start Commands**

**A** At the commencement of each heat, the referee shall signal to the swimmers by a short series of whistles to remove all clothing except for swimwear, followed by a long whistle indicating that they should take their positions with at least one foot at the front of the starting platform, the edge of the pool or on the wall and remain there. In backstroke and medley relay events, at the referee's first long whistle the swimmers shall immediately enter the water and at the second long whistle shall return without undue delay to the starting position (article 101.1.2).

**B** When the swimmers and officials are ready, the referee shall signal with an outstretched arm to the starter that the swimmers are under the starter's control.

**C** On the starter's command "Take your mark," the swimmers shall immediately assume their starting position with at least one foot at the front of the starting platform. Swimmers starting in the water must have at least one hand in contact with the wall or starting platform. When all swimmers are stationary, the starter shall give the starting signal.

**D** For backstroke event starts, the starter may give the command "Place your feet" after the referee's whistle.

**RELAYS:**

All relays are deck entered. Mixed relays may be swum, but not scored, and shall consist of two men and two women, who may swim in any order. Age groups for relays will be determined by the youngest member of the team and are: 19+, 25+, 35+, 45+, etc.

Official relay cards are to be picked up from the Clerk of Course by a team representative who is responsible for the relay. The relay representative should **print legibly** all information required. Each card should include the swimmer's name as on the USMS registration card in order of relay swum; first name, last name, age and gender. **Cards shall be returned to the computer table by 9:30am on 1/25/2015.**

**AWARDS:**

- Individual and relay awards will be given for first through third place by gender and age group for 19+, 25+.... through 100+.

**DIRECTIONS:**

The Mason Municipal Center and the Mason Community Center are both on the Community Campus at 6050 Mason-Montgomery Road (45040). The Community Center is on the north end of Mason High School.

**From Cincinnati/I-71**, take the Western Row Road exit and turn left onto Western Row. Western Row will turn left a few lights away, but go straight to stay on Tylersville Road. Turn right onto Mason-Montgomery Road at the next major intersection. The H.S. and Community Center will be on the right before you get to Main Street.

**From northern areas along I-71 (I-71 southbound)**, take the Kings Mills Road/741 exit and turn right. Stay on Route 741 by turning right in front of Kroger. Turn left at the next major intersection, US 42. US 42 turns into Main Street. Turn Left on Mason-Montgomery Road at the light. The Mason Community Center will be on your left.

**From I-75**, take the Tylersville Road exit and go east toward Mason. Once in Mason, turn left onto Mason-Montgomery Road in front of Mason Middle School. Turn right at the light at Lakeside Drive. You will be entering the Community Campus as you turn in.

**PARKING:**

**Please park in the Mason H.S. parking lot or across the street at the Mason Municipal Building.**

**ORDER OF EVENTS:**

The meet will be deck seeded according to times submitted, regardless of age and gender. Heat and lane assignments for all events will be posted by 10:00am on the day of competition.

**Deck Entries:** 8:00am-9:15am  
**Deck entry deadline:** 9:15am on 1/25/2015  
**Relay entry deadline:** 9:30am on 1/25/2015

**Warm –Ups:** 9:00am-10:00am

**Heat Sheet Posted:** 10:00am  
*(Participants should double check for accuracy at this time)*

**Events:** approx. 10:10am-3:00pm

- |                          |  |
|--------------------------|--|
| 1. 200 Medley Relay      | 10. 200 Fly                                    |
| 2. 400 Individual Medley | 11. 50 Freestyle                               |
| 3. 50 Backstroke         | 12. 200 Individual Medley                      |
| 4. 200 Freestyle         | 13. 100 Backstroke                             |
| 5. 50 Breaststroke       | 14. 50 Butterfly                               |
| 6. 100 Butterfly         | 15. 100 Breaststroke                           |
| 7. 200 Backstroke        | 16. 100 Freestyle                              |
| 8. 100 Individual Medley | 17. 200 Freestyle Relay                        |
| 9. 200 Breaststroke      | 18. 1650 Freestyle (First 24 Registrants only) |

**WARM-UP &  
COOL-DOWN:**

Entry into the pool must be feet first in a cautious manner with one hand in contact with the deck. Diving shall be permitted only from the blocks in the designated sprint lanes during warm-up. Warm-up and cool-down lanes will be provided during the competition. No diving will be permitted in these lanes. Instructions given by an official or City of Mason staff members must be obeyed at all times. A swimmer may be disqualified at the discretion of the Meet Director or Meet Official for failure to comply with these rules.

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**Sunday, January 25, 2015**  
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**PRINT LEGIBLY OR TYPE**

NAME \_\_\_\_\_ GENDER \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ AGE ON 1/25/15 \_\_\_\_\_

USMS Number \_\_\_\_\_ TEAM \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE (\_\_\_\_\_) \_\_\_\_\_ BUSINESS PHONE (\_\_\_\_\_) \_\_\_\_\_

E-MAIL \_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_ EXP DATE: \_\_\_\_\_ AMT: \_\_\_\_\_

TYPE (circle one): VISA    MASTERCARD

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

Circle the event numbers in which you would like to be entered and show your seedtime to the hundredth of a second. If you do not enter a time you will be entered "NT."

EVENT #	SEED TIME	EVENT	EVENT #	SEED TIME	EVENT
1.	_____	200 Medley Relay	10.	_____	200 Fly
2.	_____	400 Individual Medley	11.	_____	50 Freestyle
3.	_____	50 Backstroke	12.	_____	200 Individual Medley
4.	_____	200 Freestyle	13.	_____	100 Backstroke
5.	_____	50 Breaststroke	14.	_____	50 Butterfly
6.	_____	100 Butterfly	15.	_____	100 Breaststroke
7.	_____	200 Backstroke	16.	_____	100 Freestyle
8.	_____	100 Individual Medley	17.	_____	200 Freestyle Relay
9.	_____	200 Breaststroke	18.	_____	1650 Freestyle
					(First 24 registrants only)

ADVANCE ENTRIES (postmarked by 1/12/2015): \$25 per swimmer for meet including relays (paper entry) \_\_\_\_\_

DECK ENTRIES (due by 9:15am on 1/25/15) : \$40 per swimmer including relays \_\_\_\_\_

**RELEASE TO BE SIGNED:** 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 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

ATHLETE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Mason Community Center  
6050 Mason-Montgomery Road  
Mason, Ohio 45040  
513.229.8555



## GUEST INFORMATION RELEASE OF ALL CLAIMS

PLEASE PRINT

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Last Name	First Name	Middle Initial	Date of Birth
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Street Address	City/St	Zip Code
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( ) _____ Home Phone	( ) _____ Work Phone	( ) _____ Cell Phone	( ) _____ Emergency Phone
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E-mail

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Emergency Contact Name	Relationship
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( ) _____ Phone Number	( ) _____ Alternate Phone Number
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**Release of All Claims and Agreement Not to Sue**

As additional consideration of my application and permitting me the opportunity to participate in recreational activities and to utilize the facilities at the Mason Community Center, the undersigned hereby waives, releases, discharges, saves, holds harmless, and indemnifies the City of Mason and the Mason City School District, their employees, volunteers, agents, and independent contractors, from any and all claims of whatever kind, to me, my spouse, or my dependents which may directly or indirectly arise. I hereby agree to accept any and all risk of personal injury, illness, death, or property damage and verify this statement by placing my signature below. Furthermore, by signing below for myself, my dependents, and/or my spouse, I understand this release bars claims by the undersigned's spouse, dependents, heirs, assigns, executors, and administrators.

I understand that photographs and/or videotapes of me and my family members may be taken for use in promoting the City of Mason activities and facilities in future editions of CenterPoint, in a variety of other publications, on display boards throughout the Community Center and for other uses by the City of Mason. I hereby give my permission to use such photographs without compensation to me.

I HEREBY CERTIFY THAT I HAVE CAREFULLY READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A LEGAL CONTRACT AND THAT IT AFFECTS MY LEGAL RIGHTS. I AM SIGNING THIS DOCUMENT OF MY OWN FREE WILL.

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Signature of Applicant	Date
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Parent/Guardian signature of any dependent under 18 years old	Date
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