## Saturday, July 21, 2012 CANANDAIGUA SAWBELLIES ANNUAL USA SWIMMING OPEN WATER SWIM

A One-Half, One & Two Mile Open Water Swim and Picnic!!

DATE/TIME: July 21, 2012, Saturday at 9:20 am, Continuous Warm Up Starting at 7:30 am

**CHIP TIMING:** Each swimmer will be given a timing chip to wear on the ankle during the race to provide accurate times and finish places. Results will be available almost immediately.

**LOCATION:** Canandaigua, New York, Kershaw Park, Lakeshore Drive, North End of Canandaigua Lake New York State Thruway Exit 44, South 8 miles, straight to Kershaw Park

**ELIGIBILITY:** Open to all USAS registered swimmers.

**NO ESCORT:** This event will not have individual watercrafts to escort each swimmer. There will be an appropriate number of lifeguards and safety watercraft along the perimeter of the racecourse.

**CONDITIONS:** Since the safety of swimmers is of prime concern. The swimming event may be delayed or restarted or canceled due to bad weather. The Meet Director and race committee will make this decision as per USAS rule 704.2. There will be no refund.

**ENTRY FEE:** \$15.00 Includes picnic and refreshments. Participant medals for each finisher. Free parking.

**SCHEDULE:** Registration 7:30-8:15 am, 8:15 am Mandatory Meeting for all Swimmers, 8:30 am start of 2-mile swim for Masters Swimmers. USA Youth Swim will follow completion of USMS meet (approximately 9:20 am). Picnic!!!!

**COURSE:** Straight out and back one loop is 1 mile in distance, twice around for the two mile swim, half way out and back for ½ mile swim.

SWIM DIRECTOR: David Beckwith, 5181 Laura Lane, Canandaigua, NY 14424, Tel: 585-394-5703				
Name			USAS # BirthClub (where you practice)	
Sex	_Age	Date of Birth	Club (where you practice)	
Telephone No	)		Club (from your USAS card)	
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			R (ABOVE) AND SIGNED WAIVER (BELOW)	
			CANANDAIGUA MASTERS SWIM CLUB	
			452 Gehan Road, Canandaigua, New York 14424,	
221 (2 21 (11)		4-4075 email: vhecker0010	, , , , , , , , , , , , , , , , , , , ,	
WAIVER:	(303) 37	Tors email: <u>viicekeroor</u>	<u>s toenesterationn</u>	
I, the undersigned pa I am aware of all the CONDITION OF M RIGHTS TO CLAIM PASSIVE, OF THE COMMITTEES, TH	risks inherent i Y PARTICIPA IS FOR LOSS ( FOLLOWING: IE CLUBS, HO	in swimming (training and competition) FION IN THE SWIMMING PROGRAM OR DAMAGES, INCLUDING ALL CL UNITED STATES SWIMMING, INC	that I am physically fit and have not been otherwise informed by a physician. I acknowledge the including possible permanent disability or death, and agree to assume all of those risks. AS A OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL AIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR NIAGARA DISTRICT SWIMMING, THE LOCAL MASTERS SWIMMING MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR be governed by the rules of USS.	
Signature of Participant			Date	

Signature of Parent or Guardian Date

Not a USAS sanctioned event. This is a time trial at a USAS swim practice.