

**SUNDAY, JUNE 6, 2010 AT FLUSHING MEADOWS CORONA PARK AQUATIC CENTER, QUEENS
LC METER NYC PARKS MASTERS MEET & MIXED 200 LC METER MEDLEY RELAY**

Sanctioned by the Metropolitan LMSC for USMS, Inc. Sanction #060-10

LOCATION: Flushing Meadows Corona Park Aquatic Center, Queens
SCHEDULE: Warm-up 8:45 am, Start 9:45 am
MEET DIRECTOR: John H. Hutchins (718) 760-6969, Extension 0
ELIGIBILITY: Open to all registered USMS swimmers 18 & older as of 12/31/10
FACILITY: 10-lane pool, Colorado Electronic Scoreboard and Timing System

MAIL TO: John H. Hutchins
 City of New York Parks & Recreation
 Aquatics Division
 Passerelle Building/Flushing Meadows Park
 Corona, NY 11368

ENTRIES: Entries must be **RECEIVED** (not postmarked) by **Wednesday, May 19, 2010**. Entries must be submitted on this sheet with SIGNED LIABILITY RELEASE and a legible COPY OF YOUR 2010 USMS REGISTRATION CARD. You may enter up to four individual events and the relay. **All events are FREE, including the Mixed 200 Medley Relay. Entries will be accepted on a first received basis.**

SEEDING: All events will be deck seeded. Swimmers are required to check in at the meet prior to 9:15AM on event day.

AWARDS: Custom ribbons for 1st through 3rd place in all individual events.

WARM-UP: USMS warm-up procedures will be followed at the meet. Separate warm-up and cool down section available throughout the meet.

SPECTATORS: Only swimmers, coaches, officials, and timers permitted on pool deck.

FACILITY NOTE: No Smoking is allowed in the Building. No food or glass bottles on the pool deck. Swimmers and spectators are restricted to designated areas of the facility. All rules and regulations of the center must be followed.

PARKING: Located across from the pool underneath the Van Wyck Expressway ramp.

DIRECTIONS: *By Subway:* Take the #7 train to CitiField Stadium/Wilets Point station. The Flushing Meadows Corona Park Aquatic Center is about a seven minute walk down the ramp from the station and to the left on Meridian Road. *By Car:* Call the Citywide Aquatics office 718-760-6969 for information.

Print Name _____ <i>(as indicated on your 2010 USMS registration card)</i>	USMS Reg # _____
Staple Copy _____	Day Tel _____ Gender (circle one) Male Female
of 2010 USMS _____	Eve Tel _____ Email: _____
Reg Card Here _____	Date of Birth ____/____/____ Age (as of 12/31/10) _____ Club Abbreviation: _____

A. MIXED 200 LCM MEDLEY RELAY

- * Relay results are UNOFFICIAL and will NOT be submitted for USMS Top Ten consideration.
- * Awards for all 1st through 6th place relay team members.
- * Sum of the ages: any 4 swimmers, must be 2 men and 2 women, whose ages total not less than 160 years.
Example: (3 x 30 years = 90) plus (1 x 70 years = 70) totals 160 years.
- * Submit: Team members' names, ages, gender, club name, seed time (meters) or no time, and swimmer order.
Relay entries will be limited to first 20 relay teams on a first-received basis.
- * Swimmers must be individually entered in this meet for relay eligibility.
- * Relay event is open to any four entrants meeting the above stated requirements. Relay Entry Form on page two.

1. Mixed 200 LCM Freestyle _____	8. Mixed 200 LCM Individual Medley _____
2. Mixed 50 LCM Breaststroke _____	9. Mixed 50 LCM Backstroke _____
3. Mixed 100 LCM Backstroke _____	10. Mixed 100 LCM Freestyle _____
4. Mixed 200 LCM Breaststroke _____	11. Mixed 200 LCM Butterfly _____
5. Mixed 50 LCM Freestyle _____	12. Mixed 100 LCM Breaststroke _____
6. Mixed 100 LCM Butterfly _____	13. Mixed 50 LCM Butterfly _____
7. Mixed 200 LCM Backstroke _____	14. Mixed 400 LCM Freestyle _____

RELEASE 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 the risks inherent in Masters Swimming (training and competition), including possible permanent disability or death, and agree to assume all 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, OR 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: _____

Remember to include a copy of your 2010 USMS registration card with meet entry

City of New York
Parks & Recreation



Michael R. Bloomberg, Mayor
Adrian Benepe, Commissioner

