

# LAKE GEORGE OPEN WATER SWIM WEEKEND

Saturday, June 30 – July 1, 2007

**Sanction:** Sanctioned by Adirondack District Masters for USMS, Inc. # 037-004  
David Barra, General Chairman

**Host:** Glens Falls YMCA Gators in conjunction with Swim Lake George Association, Warren County, Towns of Lake George, Bolton Landing, and Hague, and the Village of Lake George.

**Location:** Lake George, New York  
The lake temperature usually varies between 67° F and 72° F during this time of year. Lake George is pristine and many families rely on the Lake water for drinking. Currents are minimal, flowing south to north. The prevailing wind direction is from the south.

**Meet Director:** Graham Bailey, PO Box 2602, Silver Bay, NY, Ph: 518-543-6811;  
Email: [gbailey6@nycap.rr.com](mailto:gbailey6@nycap.rr.com)  
Gail Jeffords, 18 Staple Street, Glens Falls, NY Email: [gmjeffor@aol.com](mailto:gmjeffor@aol.com)

**Eligibility:** Open to all swimmers, 18 & older, as of July 1, 2007. If it becomes necessary to limit the number of entries, it will be done on a last in, first cut basis. Include a copy of your USMS registration card. If you are not a member, you can obtain a one meet registration by completing the attached form (\$15.00 fee) or obtain a one year USMS membership by contacting Paul Strothenke 845-255-6073; [MidHudsonVIP@aol.com](mailto:MidHudsonVIP@aol.com) or visit [www.adms.org](http://www.adms.org) (\$30.00 fee). The age of a swimmer is his or her age on July 1, 2007. Entries must be postmarked by Tuesday, May 15, 2007. There will be no race day entries. All swimmers that are entered in the meet will be listed on the website at [www.swimlakegeorge.org](http://www.swimlakegeorge.org). USMS Technical Rules will be in effect.

**Events:** 500 m, 1 km, 2 km, and 6 km individual swims and a 4 X 1 km relay. Relay teams must consist of 4 members and may be any combination of genders – all male, all female, or a mix. Age groups for relays will be 18-34, 35-49, and 50-64, and 65 & over. The age group of the relay team will be determined by the age of the youngest swimmer.

Event	Location	Date	Time
<b>1 km swim</b>	Million Dollar Beach, Lake George Village	6/30/07	9:30 am
<b>4 km relay</b>	Million Dollar Beach, Lake George Village	6/30/07	11:00 am
<b>500 m swim</b>	Bolton Landing	7/1/07	10:30 am
<b>6 km swim</b>	Hague, Silver Bay to Hague Beach	7/1/07	9:00 am
<b>2 km swim</b>	Hague	7/1/07	1:00 pm

**Safety:** Safety support will be coordinated with the Lake George Park Commission, Warren County Sheriff's office and the New York State Department of Environmental Conservation. Local authorities, the meet referee, and Meet Management have the authority to postpone or cancel the event for safety reasons. Updates will be posted on [www.swimlakegeorge.org](http://www.swimlakegeorge.org).

There will be sufficient craft on or adjacent to the prescribed course to insure the safety of the swimmers. Swimmers will be briefed on all safety aspects before the start of the race. All safety personnel and race officials will be identified by signage and distinctive clothing. Swimmers will be advised of their location.

**Officials:** Currently certified USAS officials will be provided.

**Results:** Results will be posted at [www.adms.org](http://www.adms.org) and [www.swimlakegeorge.org](http://www.swimlakegeorge.org)

**Entry Fees:** Entry fees are twenty-five dollars (\$25.00) for each individual event. Relay entry fee will be fifty dollars (\$50.00) per team. There will be an additional \$15.00 charge for each swimmer who is not a member of USMS to cover the cost of membership registration for the meet. Members of USMS must attach a copy of their card to the entry form. Nonmembers must complete the One Event Registration form. If you wish to become a member of USMS, contact Paul Strothenke 845-255-6073; [MidHudsonVIP@aol.com](mailto:MidHudsonVIP@aol.com) or visit [www.adms.org](http://www.adms.org). Entry fees must accompany the entry application. Make checks payable to **Swim Lake George**. Please send entry form along with a copy of your

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USMS card or one event registration form to: Gail Jeffords, 18 Staple Street, Glens Falls, NY 12801. Each swimmer will receive an event T-shirt.

***Check-in:***

All swimmers must check in at the starting location at least 1 hour prior to the scheduled start of the race. All swimmers will be required to attend the final pre-race briefing 30 minutes before the start of the race. Failure to arrive on time for the briefing could result in disqualification.

***Lodging:***

Lodging, if required, must be obtained by each competitor. A listing of hotels in the area will be posted on website [www.swimlakegeorge.org](http://www.swimlakegeorge.org)

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## Lake George Open Water Swim Entry Form

<b>Staple legible copy of USMS card here</b> or complete and attach the One Event Registration Form			<b>Please supply the following information:</b>
Name			Day Phone (    )
Address			Evening Phone (    )
Gender	Birth date	Age (as of July 1, 2007)	Email

RELEASE OF LIABILITY BY PARTICIPANT: 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 of 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. Finally, I specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

**DATE** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**In case of emergency, contact: Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

TRANSFER OF RIGHTS: Understanding the importance for event organizers of keeping all filming, television, photographing and other recording rights during the Event, in consideration of the acceptance of my participation in event, agree to be filmed, televised, photographed and otherwise recorded during the Event under the conditions and for the purposes now and hereafter authorized by the race organizers in relation to the promotion of the Sport of Swimming.

**DATE** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

I will participate in the following event(s): \_\_\_ 500 m    \_\_\_ 1 km    \_\_\_ 2 km    \_\_\_ 4 km  
 Cost per event is: \$25.00 for USMS members. Non-members must submit \$25.00 for each event entered PLUS \$15.00 for registration AND complete the one event registration form attached.

I will participate in the following relay: \_\_\_ 4 km    \_\_\_ 2 km  
 Relay Age Group:    \_\_\_ 18-34    \_\_\_ 35-49    \_\_\_ 50-64    \_\_\_ 65 & over  
 The cost per relay team is \$50.00 or \$12.50 per team member. If you are not entered in an individual event and are not a member of USMS, please add \$15.00 to the cost of the relay entry AND complete the one event registration form attached.  
 Other relay team members (Each Team member must submit an individual entry form)

**FIRST-TIMERS:** If this is your first meet and you are registered as an Adirondack Master, you are eligible for a First-Timers T-shirt: Please circle size: M L XL

**Please return entries to: Gail Jeffords, 18 Staple Street, Glens Falls, NY 12801**  
**E-mail: gmjeffor@aol.com**

Make Check Payable To: Swim Lake George

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THIS FORM MUST BE POSTMARKED NO LATER THAN May 15, 2007



# 2007 ONE EVENT REGISTRATION FORM



## 2007 ONE EVENT MEMBERSHIP APPLICATION

USMS Fee:   \$8.00  

LMSC Fee:   7.00  

TOTAL FEE   \$15.00  

Register with same name you will use for competition. Print clearly.

Last Name		First Name		Init	For Office Use	
Street				Apt		
City		State	Zip	Phone No. (    )		
Date of Birth		Age	Sex	Today's Date		
Mo.	Day	Yr		Mo	Day	Yr

### OEVT - One Event Membership      Event Date:

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.

Signature \_\_\_\_\_

