

North Carolina Short Course Yards Championships

April 28–29, 2007



Sponsor: Raleigh Area Masters
Sanction by: LMSC for NC, for USMS, Inc. Sanction No. 137-04
Meet Organizers: Tim Lehman – meetdirector07@yahoo.com
Sue Haugh

Meet Referee: Tom Cox

Facility: Pullen Aquatic Center, 410 Ashe Avenue, Raleigh, NC. The pool is 50 meters by 25 yards with a bulkhead dividing the competition area into an 8 lane x 25-yard competition pool and 10 lanes x 25-yard warm up pool. Non-turbulent lane lines and an electronic timing system will be used. Competition pool is 16 feet deep. The pool will be measured for compliance with new USMS rules on records. Results will be submitted for top ten immediately following the meet.

Rules: Swimmers must be registered with U.S. Masters Swimming (USMS). Out of state swimmers must supply a photocopy of your 2007 registration card. 2007 USMS rules shall prevail. Each swimmer will be limited to five events per day plus relays. Swimmers may enter either the 1650 or the 1000 Free, not both. **The 1650, 1000, and 500 freestyle races will be deck seeded fast to slow. See the check in schedule below for these events. In order to keep the meet running smoothly it is important you check in on time. You do not have to check in for any other events.**

Fees: Entry fees are \$4.00 for each individual event and a \$10.00 surcharge is added for automatic timing and pool rental. Relay fees are \$5.00 and will be paid at the meet. **Individual event fees must accompany entries and are non-refundable.** Make checks payable to **Raleigh Area Masters**. Send entries to:
Tim Lehman, 104 Magerton Ct, Cary, NC 27511

Deadline: Entry deadline to avoid late fees is April 23th, 2007. Late and deck entries will be accepted at \$6.00 per event. Be there early to deck enter. To expedite deck entries there will be a separate entry area for men and women. See schedule below for deck entry times.

Awards: Awards will be given for 1st place in each age group as well as team awards. Cards will be provided for placing stickers that will contain your event/time/place.

Scoring: Scoring will be 9-7-6-5-4-3-2-1 for individual events and 18-14-12-10-8-6-4-2 for relays.

Event Times:

	Event	Warm Up	Final Check In	Events Start	Final Deck Entries
Sat	1-4	8 am	8:10 am	8:30 am	8:10 am
	5–24	11:30 am		12:30 pm	12 pm
Sun	25-44	8 am		9 am	8:45 am
	45–46	--	10:30 am	--	10:30 am

Social Event: A social is planned for Saturday evening starting around 6:00 pm at a local “hip” restaurant where you will have a choice of one of three entries. Dessert and appetizers will be provided as well. The restaurant is close to the pool. As we finalize the event we will post updated information on NC Masters website.

Entry Form

Name _____ Male Female USMS# _____
 Phone (_____) _____ - _____
 Birth Date ____/____/____ Age _____ Club _____ Email Address _____

Circle event number and enter time in the space provided. Enter NT for No Time.

W	M	SATURDAY, April 28, 2007	Time	W	M	SUNDAY, April 29, 2007	Time
Warm-up 7:45 a.m. Start 8:30 a.m.				Warm-up 8:00 a.m. Start 9:00 a.m.			
1	2	1650 Freestyle		25	26	100 I.M.	
3	4	1000 Freestyle		27	28	50 Butterfly	
Start No Earlier than 12:30 p.m.				29	30	200 FREE RELAY	
5	6	50 Freestyle		31	32	100 Backstroke	
7	8	MIXED 200 FREE RELAY		33	34	50 Breaststroke	
9	10	100 Breaststroke		35	36	400 FREE RELAY	
11	12	200 Backstroke		10 Minute Break			
13	14	100 Butterfly		37	38	200 Breaststroke	
10 Minute Break				39	40	100 Freestyle	
15	16	200 MEDLEY RELAY		41	42	200 Butterfly	
17	18	200 IM		43	44	MIX 200 MEDLEY RELAY	
19	20	200 Freestyle		45	46	500 Freestyle	
21	22	50 Backstroke					
23	24	400 I.M.					

Checks to: Raleigh Area Masters	No. of events _____ x \$4.00 = \$ _____	For Official Use Only
	Meet Surcharge = \$ 10.00	
Mail to: Tim Lehman, 104 Magerton Ct, Cary, NC 27511	Social Event _____ x \$18.00 = \$ _____	
	Total = \$ _____	
		Date _____

USMS WAIVER

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.

CITY OF RALEIGH WAIVER

IN CONSIDERATION OF THE ACCEPTANCE OF THE Raleigh Masters Masters SWIM MEET SPONSORED BY Raleigh Area Masters TO BE HELD April 28 -29, 2007 AT THE Pullen Aquatic Center POOL OF THE CITY OF RALEIGH, I HEARBY, MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS, RELEASE AND DISCHARGE THE CITY OF RALEIGH, PARKS AND RECREATION DEPARTMENT, THE PROMOTERS, MANAGERS, EMPLOYEES, AND OPERATORS OF THE Pullen Aquatic Center POOL FROM ANY INJURY OR LOSS WHICH MIGHT OCCUR DURING MY PARTICIPATION AND TRAVEL TO AND FROM THE SAID EVENT. I SPECIFICALLY RELEASE AND DISCHARGE THE SAID PROMOTERS AND SPONSORS AND THE CITY OF RALEIGH WHOSE FACILITIES ARE BEING USED FOR THIS EVENT, ETC., FROM ALL INJURIES OR DAMAGES ARISING FROM OR CONTRIBUTED TO BY ANY PHYSICAL IMPAIRMENTS OR DEFICIT I MAY HAVE, WHETHER LATENT OR PATENT, AND AGREE THAT THEY ARE UNDER NO OBLIGATION TO PROVIDE PHYSICAL EXAMINATION OR OTHER EVIDENCE OF MY FITNESS TO PARTICIPATE IN SUCH EVENTS, THE SAME BEING MY SOLE RESPONSIBILITY.

Name _____ Signature _____
 Date _____

Street Address _____

City _____ State _____ Zip Code _____

Signature on form is **REQUIRED!**

Late or incomplete entries or entries postmarked after date due **MAY BE REJECTED!**



Hotel Information

Holiday Brownstone Hotel & Conference Center
 1707 Hillsborough St. Raleigh, NC 27605
www.brownstonehotel.com

In-House Reservations office hours are Monday through Friday between
 8:00 am and 5:00 pm.
 Local: (919) 828-0811
 Toll Free: 1-800-331-7919

RESERVATION METHOD:

Guests to make their individual reservations by contacting one of the Reservations Departments as stated above. Reservations to be received no later than Friday, 4/13/2007 to receive group rate. After the cut-off date, no reservations will be guaranteed at the special group rate.

Group Rate - \$79. All room rates are quoted on a net non-commissionable basis and do not include applicable taxes, subsidies, housing fees or other charges that may be required. Please note the tax for Raleigh is currently thirteen percent (13%).

Block of Rooms	Fri	04/27	Non-Smoking Double	10
	Sat	04/28	Non-Smoking Double	30