



The 2024 Middletown Masters Fall Invitational

Saturday October 19, 2024

Warm up: 9:00am Meet Start: 9:45am

Hosted by: The Middletown Marlins Masters Workout Group and Connecticut Masters

Meet director & Meet Referee: Rob Duguay

Online Entry Coordinator: Rob Duguay

Sanctioned by: Connecticut LMSC for US Masters Swimming Inc. Sanction Number: Pending

Facility: **The Middletown Recreation Center Pool**
140 Wilderman's Way, Middletown, CT 06457

The Middletown Recreation Center Pool is an indoor, 6 lane 25 yard pool with ample seating in the stands and plenty of deck space. There will be 5 lanes used for competition and at least One (1) lane(s) for constant warmup/warm down. The length of the competition course is in compliance and on file with USMS articles 105.1.7 and 106.2.1. Times will be submitted for USMS Top 10 and Records.

Water depth at the start end of competition pool is: 12ft. Water depth at turn end is: 3.5ft. Colorado timing system with 6 lane display and touch pads at the turn end. Team seating is available.

Parking: All athletes, coaches and spectator parking will be in the lower lots next to Beman Middle School. There is handicap accessible parking directly in front of the Recreation Center.

Warm up: 9:00am. All six lanes will be open for circle swimming warm up at 9:00am. FEET FIRST ENTRY is required during warm up except in designated One-Way Sprint lanes. One lane will remain open for continuous circle swim warm up throughout the meet. FEET FIRST ENTRY is required in the continuous warm up warm down lane.

Meet Start: 9:45am.

Timing System: The primary Timing system will be an Automatic Timing System. We will be using a Colorado Timing System, System 6 console with touch pads on the start and turn ends, one button as a semi-automatic back up and at least one watch per lane as a manual back up. Times from this competition will be eligible for USMS record, and Top 10 consideration.

Rules and Eligibility: Current USMS rules will govern the meet. All participants must be age 18 or older as of the last day of the meet and be currently registered members of U.S. Masters Swimming. Foreign

swimmers must provide proof of current membership in their country's Master Swimming governing body. Swimmers' ages will be determined as the swimmer's age as of October 19, 2024.

Entry Limit: Swimmers are permitted to enter a MAXIMUM of Five-5 Individual Events and Two- 2 Relays. The 400yd Individual Medley and 500 yd Freestyle will be capped at 3 heats (15 Swimmers). Positive check-in is required for the 500yd Freestyle and the 400yd IM.

Age Determination Date: Swimmer's age as of **October 19, 2024**.

RELAY ENTRIES: Women's relays must consist of four women. Men's relays must consist of four men. Mixed relays may be made up of two women & two men. Mixed, Men's and Women's relays maybe run in the same heat. Relay age group is determined by the age of youngest relay member: 18+, 25+, 35+, 45+, and up in 10 year increments as high as needed. Age of each team member is age as of October 19, 2024.

Record Times: A swimmer who intends to post a USMS National Record or FINA World Record during the meet should bring it to the attention of the Meet official **PRIOR TO YOUR EVENT**

Entry Fees: The entry fee is \$20 Meet Surcharge and \$5.00 per individual event. Relays are no cost but each swimmer on a relay must be registered for at least ONE (1) Individual Event. ONLINE ENTRY IS STRONGLY ENCOURAGED. Mailed entries should be **RECEIVED NO LATER than October 17, 2024** and have a check made out to **CT Aquatic Events**.

Online Entries:

Mail-in Entries: Mail-in entries should include the signed entry form, signed USMS Liability waiver, a copy of your USMS Card and a check made out to **CT Aquatic Events**. Mail -in entries must be sent to:

Middletown Masters Meet
CT Aquatic Events
C/O Rob Duguay
1487 Farmington Ave. Apt 21
Farmington, CT 06032

Deck Entries: Deck entries will be accepted until 9:15am. \$20 Meet Surcharge and \$5.00 Per Individual Event payable in cash or a check made out to **CT Aquatic Events**.

Questions: Questions regarding the meet can be directed to Meet Director, Rob Duguay at bobbydoogs@gmail.com

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EVENT ORDER:

#	EVENT	ENTRY TIME	#	EVENT	ENTRY TIME
1	Mixed 400 Yd IM	_____	12	Mixed 200 Yd Backstroke	_____
2	Women's 200 Yd Medley Relay*	_____	13	Mixed 50 Yd Butterfly	_____
3	Men's 200 Yd Medley Relay*	_____	14	Mixed 200 Yd IM	_____
4	Mixed 200 Yd Medley Relay*	_____	15	Mixed 100 Yd Freestyle	_____
5	Mixed 200 Yd Freestyle	_____	16	Mixed 200 Yd Breaststroke	_____
6	Mixed 50 Yd Breaststroke	_____	17	Mixed 50 Yd Backstroke	_____
7	Mixed 100 Yd Backstroke	_____	18	Mixed 100 Yd Butterfly	_____
8	Mixed 200 Yd Butterfly	_____	19	Women's 200 Yd Freestyle Relay*	_____
9	Mixed 100 Yd IM	_____	20	Men's 200 Yd Freestyle Relay*	_____
10	Mixed 50 Yd Freestyle	_____	21	Mixed 200 Yd Freestyle Relay*	_____
11	Mixed 100 Yd Breaststroke	_____	22	Mixed 500 Yd Freestyle	_____

*Relay heats maybe combined.

LIABILITY RELEASE: 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 THIS MEET 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, THE TOWN OF BROOKFIELD 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. (Rule book article 204.1)

SIGNATURE _____ DATE _____

PRINT NAME _____ GENDER (circle one) male female

ADDRESS/CITY/STATE/ZIP _____

EMAIL ADDRESS _____ DATE OF BIRTH: ____/____/____

AGE: _____ (as of 10/19/2024) USMS #: _____ [please attach copy of card]

DAY TELEPHONE (____) _____ - _____ EVE TELEPHONE (____) _____ - _____

LMSC (i.e.: CT, NE, Metro): _____ CLUB (i.e.: Connecticut Masters, Chelsea Piers): _____