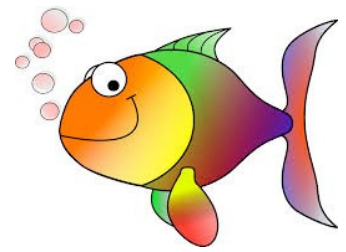




O*H*I*O MASTERS SWIM CLUB
 (Old Hearts Inspiring Others)
 CLEVELAND – WEST SIDE
 SWIM WORKOUTS
 FALL and WINTER Sessions



COACHED WORKOUTS – Ohio Masters Swim Coaches (Bob Babiak, Jessie Zielinski, and/or Arnie Colvin), will provide workouts, conditioning, stroke drills, goal setting, and individualized instruction to all who wish to participate. All adult swimmers, fitness and competitive, and triathletes are invited to participate.

SPONSORED BY O*H*I*O MASTERS SWIM CLUB - All participants must be current members of O*H*I*O Masters Swim Club to participate in the workouts because USMS liability insurance will cover these workouts. Membership is about \$53 which includes US Masters Swimming registration through the end of the calendar year. (Register on line at www.usms.org) You may attend as a guest for one week before paying the membership fee (paperwork attached.)

FACILITY: Lakewood High School Pool - Eight lanes of a 25 yard course. The pool is located inside Lakewood High School. Enter the doors off of Robinwood Ave. north off of Madison Ave. There is ample parking. Enter locker rooms from the pool deck.

SCHEDULE: Fall session begins the Wed. after Labor Day and runs through January 31. The winter session begins Feb. 1 and runs until we head to Lakewood Park, Foster Pool in June. Exact date varies each year.

Mondays, Wednesdays 7:30 - 8:30 p.m.

Thursdays 8:30 – 9:30 p.m.

Saturdays: 7:30 – 9:00 a.m.

Sundays: 11:30 - 1:00 p.m.

Some dates may be canceled due to swim meets, holidays, etc. If the school day is cancelled due to weather then practice is cancelled as well.

COSTS:

EARLY BIRD SAVINGS!

(pay in full during the first 30 days of the session)

Full Program for the Fall or Winter session (3 x week)	\$200	\$175
Two days a week for the Fall or Winter session	\$175	\$150
One practice per week for the Fall or Winter Session	\$150	\$125
Drop in per session/swim card	\$ 5 each or \$25 for 6 swims paid in advance	

For more information contact Lori Luken: Loriluken59@gmail.com (440-759-5608)

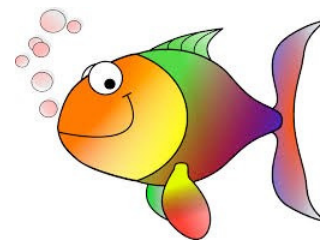
No form needed if you are a current swimmer with info already on file. Just send us a check !

Please bring the registration form below with your check to practice or mail to

Keith Owen, Treasurer, Ohio Masters Swim Club

1356 Park Row, Lakewood, 44107

Checks are payable to OHIO Masters Swim Club



O*H*I*O MASTERS - Fall or Winter Sessions at Lakewood High School Pool

Name:

Email address:

Address:

Cell Phone:

City:

Zip code:

Birth Date:

Age:

USMS Number:

Please check appropriate program below:

Early Bird Special
(pay in full by the first month of the session)

<input type="checkbox"/> Full Program for the Fall	\$200	\$175
<input type="checkbox"/> Two days a week for the Fall	\$175	\$150
<input type="checkbox"/> One practice per week for the Fall	\$150	\$125
<input type="checkbox"/> Drop in per session	\$ 5	

for those who have paid a workout fee with another Ohio Masters workout place, i.e. have paid pool time at CSU, Orange, Stow, Salem, or Euclid)

Drop in per session \$ 8

for those who **only** have a USMS membership (ex: have paid OHIO Masters membership or other USMS membership, but haven't paid for regular pool or coaching fees as a regular part of an OHIO MASTERS workout group)

Drop in special: 6 swims for the price of 5 \$25 paid in advance

(For those who are OHIO Masters members but have an irregular schedule. You keep track of your swims. Never expires (unless you do.)

Signature:

Date:

PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. (“USMS”) allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn- to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities (“Event” or “Events”); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the “Agreement”);

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers (“Risks”). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the “Released Parties”), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys’ fees) of any kind or nature (“Liability”) which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle) M F	Date of Birth (mm/dd/yy)
Street Address, City, State, Zip				
Signature of Participant				Date Signed

