

2nd ANNUAL Concord Masters Mini Meet Sunday, October 26, 2008

**Friends of the Concord-Carlisle High School Swim and Dive Team (FOSD)
host this fundraiser to support the team's 2008-2009 season at the
Beede Swim and Fitness Center in Concord, Massachusetts.
Come enjoy our wonderful facilities!**

ENTRY FORM

Meet registration: 039-021-RSCM-- USMS Membership NOT Required.
Location: Beede Swim and Fitness Center, 498 Walden Street, Concord, MA
On the campus of Concord-Carlisle High School
Time: 7:45 am Warm-up, 8:45 am Start, 12:15 pm Finish
Format: Short-course meters
Entry Fee: **\$25.00 entry fee and \$3 per event (maximum 5 events)**
Please make checks payable to "Friends of CCHS Swim + Dive"
Mail to: FOSD, PO Box 273, Concord, MA 01742
Contacts: Meet Director: Cathie Petersen clpetersen5@comcast.net
Information contact: Chris Clark clarkcdc1@aol.com

Entries due by October 18, 2008. Limited to first 130 entrants.

Directions: From East, or I-95 (Route 128), take Route 2 West. At Route 126/ Walden Pond exit in Concord, (about 4 miles,) take right on Walden St. High school entrance is second left, then right into Beede parking lot.
From West, Route 495 to Route 2 East, 10 miles until the Concord rotary. Continue straight through rotary on Route 2 East until 4th set of lights (Route 126/ Walden Pond.) Stay in left lane and take left on Walden St. Entrance to Concord-Carlisle High School campus is second left, take right into Beede parking lot.

Order of events (circle number and place seed time next to events you are entering):

- | | | |
|-----------------------------|----------------------------|--------------------------|
| 1. _____ 100 m Butterfly | 5. _____ 100 m IM | 9. _____ 100 m Freestyle |
| 2. _____ 50 m Backstroke | 6. _____ 200 m Freestyle | 10. _____ 50 m Butterfly |
| 3. _____ 100 m Breaststroke | 7. _____ 100 m Backstroke | 11. _____ 200 m Choice** |
| 4. _____ 50 m Freestyle | 8. _____ 50 m Breaststroke | 12. _____ 400 m Free * |

* Counters provided

** IM, back, breast or butterfly

Enter Total Number of Events = _____ X \$3.00 = _____ + \$25.00 meet entry fee = _____
Total due

Last Name: _____ First Name _____ USMC Reg# _____

Birth Date: _____ Age: _____ (as of 12/31/2008) Gender: Male _____ Female _____

Phone: _____ E-mail: _____ **(please print clearly)**

Swimmer's 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 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: _____ Date: _____