



## O\*H\*I\*O MASTERS 2003 - LONG-COURSE SWIM MEET

CLEVELAND STATE BUSBEY NATATORIUM, CLEVELAND

JULY 12 - 13, 2003

**DATE** Sat. July 12, 2003 Warmups: 3:00 p.m.. Meet: 4:00 P.M.  
Sun. July 13, 2003 Start 9:00 a.m. for 400 Free, 9:30 a.m. or later for Event 8  
Warm-ups: 8:00 a.m. Deck entries until 9:00 a.m.

**NATATORIUM** The Cleveland State Busbey Natatorium, 2451 Euclid Ave., Cleveland, OH, was designed by one of our members, Peter van Dijk, and is recognized as one of the fastest pools in the country. We are fortunate to be able to use this pool for our meet thanks to the generous cooperation of Lee Reed Director of Athletics at CSU, and Wally Morton, Director of Aquatics and Swim Coach. The pool is an 9-lane 50-meter pool, equipped with automatic timing and digital read-out board.

**LOCATION** To reach the Natatorium take I-90 to downtown Cleveland and exit at Chester Avenue. The Natatorium is located at this exit, just west of I-90. It is the large brick building behind the dome building, between Chester and Euclid Avenues. Parking will be ample on the weekend in the many University parking lots.

**ELIGIBILITY** Lake Erie Association of USMS. Entrants must be registered with USMS. Registration forms for USMS (Lake Erie Association) will be available (\$ 35.00 fee). Membership in O\*H\*I\*O Masters \$5.00 more. Limit 5 individual events per day. Please send copy of USMS card with entry form. All relays can be swum with 4 Women, 4 Men, or Mixed ( 2 women and 2 men). Only swimmers entered in the meet, and belonging to the same USMS-registered Club can participate in relays.

**AGE GROUPS** AGE OF COMPETITORS ON **DEC 31, 2003** WILL DETERMINE AGE/AGE GROUP.  
Age groups are: 19-24, 25-29, 30-34, . . . , 80-84, 85-89, 90+. For Relays: Age group is determined by the sum of the ages of the swimmers: 76+, 100+, 120+, 160+, 200+, 240+, 280+, 320+. Only registered Clubs can enter relays.

**AWARDS** Individual events: First-place medal, second, third, fourth, fifth, and sixth-place ribbons. Relays: first, second, and third-place ribbons. We have alternative awards for those who already have too many medals. More Information at the meet.

**SEEDING** Heats will be formed by submitted times, regardless of age or sex, and progress from fast to slow to "NoTime" and Deck Entries.

**DEADLINE** Entries must be received by July 5, 2003. Deck entries will be accepted until 9:00 a.m. on Sunday, except for Events 5, 6, and 7 (800/1500 m. Free and 400 m. Free). Relays can be deck-entered during the meet.

**FEES** Fees must accompany entry forms. Individual events: \$ 5.00,  
Timing Surcharge: \$ 5.00, Deck entries: \$ 6.00 per event.  
Relays can only be deck-entered: No charge  
Make checks payable to: O\*H\*I\*O MASTERS SWIM CLUB  
and mail to: Pieter Cath, 35400 Bainbridge Road, Solon, OH 44139.

**MEET DIRECTOR** Pieter Cath.

**CSU HOSTS** Lee Reed, Director of Athletics, and  
Wally Morton, Director of Aquatics and Swim Coach.

## 1500 AND 800 METER FREESTYLE

Enter the 800 m. Freestyle only if you do not plan to swim the 1500 m. Freestyle. Everyone, who swims the the 1500 m. Free will automatically be entered in the 800 m. We will use your 800-m. split as your final time. Needless to say, you will not be allowed to enter both the 800 and the 1500 m. Free. Also, no deck entries for these two events.

## OPEN EVENTS

We offer "Open" events on Saturday night to allow people to swim events that would otherwise be too close together on Sunday. A stroke swum in an open event may not be repeated the next day. Results of the open events are combined with the events of Sunday.

**MOTELS** The following motels are located downtown:

Comfort Inn 1800 Euclid Avenue, Downtown Cleveland	(216) 861-0001 (800) 228-5150
Sheraton Cleveland City Centre Hotel 777 St. Clair Ave., Downtown Cleveland	(216) 771-7600 (800) 325-3535
Holiday Inn Select - City Center 1111 Lakeside Avenue, Downtown Cleveland	(216) 241-5100

Additional recommendations (easy access by freeways):

Red Roof (I-77 and Rockside Rd.)	(440) 439-2500
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**SOCIAL** There will be a Social after the meet on Sunday (1:00 - 2:30). Details will be announced at the meet. Please indicate on entry form whether you plan to attend.

## ORDER OF Saturday, July 12, 2003 EVENTS

1. 50 m. Open
2. 400 m. Individual Medley
3. 100 m. Open
4. 200 m. Open
5. 800 m. Freestyle Relay
- \* 6. 800 m. Freestyle
- \* 7. 1500 m. Freestyle

### FOR OPEN EVENTS :

Designate choice of stroke  
(Free, Backstroke, Breast,  
Fly, or I.M.) Event may not  
be repeated on Sunday

## Sunday, July 13, 2003

- |                         |                              |
|-------------------------|------------------------------|
| * 8. 400 m. Freestyle   | 17. 200 m. Individual Medley |
| 9. 200 m. Butterfly     | 18. 100 m. Breaststroke      |
| 10. 400 m. Free Relay   | 19. 50 m. Backstroke         |
| 11. 100 m. Backstroke   | 20. 100 m. Butterfly         |
| 12. 50 m. Freestyle     | 21. 200 m. Free Relay        |
| 13. 200 m. Breaststroke | 22. 200 m. Freestyle         |
| 14. 200 m. Medley Relay | 23. 50 m. Breaststroke       |
| 15. 50 m. Butterfly     | 24. 200 m. Backstroke        |
| 16. 100 m. Freestyle    | 25. 400 m. Medley Relay      |

- \* No deck entries for events 6, 7, and 8
- \* You cannot enter both event 6 and 7

**ENTRY FORM**

**USMS SANCTION: # 18-071303-LCM**

**O\*H\*I\*O MASTERS 2003 - LONG-COURSE SWIM MEET  
CLEVELAND STATE BUSBEY NATATORIUM, CLEVELAND**

**JULY 12 - 13, 2003**

NAME \_\_\_\_\_ SEX \_\_\_\_ AGE ON DEC 31 2003 \_\_\_\_  
BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ TEAM \_\_\_\_\_ or UNattached \_\_\_\_ USMS # \_\_\_\_\_  
(send copy of card)

Enter your events and seedtimes on this form.

**SATURDAY, JULY 12, 2003 4:00 P.M.**

- 1. 50 m. Open \_\_\_\_\_ Stroke \_\_\_\_\_
- 2. 400 m. Indiv. Medley \_\_\_\_\_
- 3. 100 m. Open \_\_\_\_\_ Stroke \_\_\_\_\_
- 4. 200 m. Open \_\_\_\_\_ Stroke \_\_\_\_\_
- 5. 800 m. Freestyle Relay XXXXXXXXXXXXXXXXXXXX
- 6. 800 m. Freestyle \_\_\_\_\_
- 7. 1500 m. Freestyle \_\_\_\_\_

**FOR OPEN EVENTS:**

Designate choice of stroke  
(Free, Backstroke, Breast,  
Fly, or I.M.) Event may not  
be repeated on Sunday

NO DECK ENTRIES FOR EVENTS 6 AND 7. DO NOT ENTER BOTH EVENTS 6 AND 7.

**SUNDAY, JULY 13, 2003 9:00 A.M.**

- 8. 400 m. Freestyle \_\_\_\_\_ NO DECK ENTRIES FOR EVENT # 8
- 9. 200 m. Butterfly \_\_\_\_\_
- 10. 400 m. Free Relay XXXXXXXXXXXX
- 11. 100 m. Backstroke \_\_\_\_\_
- 12. 50 m. Freestyle \_\_\_\_\_
- 13. 200 m. Breaststroke \_\_\_\_\_
- 14. 200 m. Medley Relay XXXXXXXXXXXX
- 15. 50 m. Butterfly \_\_\_\_\_
- 16. 100 m. Freestyle \_\_\_\_\_
- 17. 200 m. Indiv. Medley \_\_\_\_\_
- 18. 100 m. Breaststroke \_\_\_\_\_
- 19. 50 m. Backstroke \_\_\_\_\_
- 20. 100 m. Butterfly \_\_\_\_\_
- 21. 200 m. Free Relay XXXXXXXXXXXX
- 22. 200 m. Freestyle \_\_\_\_\_
- 23. 50 m. Breaststroke \_\_\_\_\_
- 24. 200 m. Backstroke \_\_\_\_\_
- 25. 400 m. Medley Relay XXXXXXXXXXXX

Swimming Fees: Individual events \_\_\_\_\_ x \$ 5.00 = \$ \_\_\_\_\_  
 Surcharge \$ 5.00  
 Discount for members of  
 O\*H\*I\*O MASTERS Swim Club ( \$ 3.00 ) \_\_\_\_\_  
**TOTAL \$ \_\_\_\_\_**  
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**Deadline : July 5, 2003**

Make checks payable to: **O\*H\*I\*O MASTERS SWIM CLUB**  
Mail to: Pieter Cath, 35400 Bainbridge Road, Solon, OH 44139

**Release by Participant from Liability:**

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 \_\_\_\_\_

\*\*\* ARE YOU PLANNING TO ATTEND THE SOCIAL ? HOW MANY PEOPLE \_\_\_\_\_ \*\*\*