



## **2016 SHORT COURSE INVITATIONAL SWIM MEET**

“Sanctioned by Masters Swimming Ontario and open to all registered Masters Swimmers 18 years of age and over.”

“Proof of membership must and be supplied if coming from out of Ontario. Membership cards or numbers must be presented for verification”

**A portion of all monies received for Swim Meets will be donated to Technosport's Paralympic Athlete Sponsorship program**

DATE: Sunday, February 7, 2016

LOCATION: UNIVERSITY OF OTTAWA  
Montpetit Hall 125 University Private (west of King Edward St.)

TIME: 7:00 a.m. Warm-up  
7:45 a.m. Start  
9:30 a.m. Finish

FREE: Breakfast after swim meet

Entry Fee: \$45.00 flat fee----**LATE DECK ENTRY \$50.00**

Entries: Due by Thursday, January 26 2016

Events: Events Seeded by Time  
Individual Events - Men & Women Mixed  
Heats Swum Slowest to Fastest  
Limited to 5 individual events per swimmer plus 1 relay

Enter and pay online at:

<http://www.technosport.ca/swim-camps-and-technosport-invitational-swim-meets/>

Or Cheque made payable to:

TECHNOSPORT  
1094 Castle Hill Cres.  
Ottawa, Ont. K2C 2A8

Phone: (613) 769-4204

E-mail: [technosport@rogers.com](mailto:technosport@rogers.com)

Web Site: [www.technosport.ca](http://www.technosport.ca) (online registration)

**Chief Official Wendy McCutcheon**

**TECHNOSPORT SHORT COURSE INVITATIONAL SWIM MEET**

Sunday, Feb 7, 2016

**SCHEDULE OF EVENTS**

(Limited to 5 individual events per swimmer plus 1 relay)

Please Enter Entry Time

- 1. 100 IM.....\_\_\_\_\_
- 2. 50 Fly.....\_\_\_\_\_
- 3. 100 Back.....\_\_\_\_\_
- 4. 50 Breast.....\_\_\_\_\_
- 5. 50 Free.....\_\_\_\_\_
- 6. 100 Breast.....\_\_\_\_\_
- 7. 50 Back.....\_\_\_\_\_
- 8. 200 I M.....\_\_\_\_\_
- 9. 100 Fly.....\_\_\_\_\_
- 10. 100 Free.....\_\_\_\_\_
- 11. 200 Choice Relay .....\_\_\_\_\_

**ATHLETE WAIVER & RELEASE**

In consideration of the acceptance of this entry, I for myself, my executors, administrators and assigns, do hereby release and discharge the TECHNOSPORT Masters, Master Swimming Ontario and Master Swimming Canada from all claims and damages, demands and actions whatsoever in any manner arising or growing out of my participation in this event. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate.

Name: \_\_\_\_\_ Club \_\_\_\_\_ MSO# \_\_\_\_\_

Or other affiliation

Address: \_\_\_\_\_ Age as of Dec.31 2016: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

e-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_