

Spring Lake Swims  
Saturday May 16th  
2015 @9am 500m  
9:30am 1 mile

Sanction #  
385-W003

RACE DETAILS: 8:45 AM Meeting for Announcements and  
Safety Mandatory at the Registration tent.

9:00 am 500m wave start

9:30AM 1 mile wave start

\$40 PRE-REGISTRATION - \$55 for both Swims

1. online - visit [www.lifeguardsforlife.org](http://www.lifeguardsforlife.org) or [www.active.com](http://www.active.com)
2. mail completed entry before May 9th, 2015 to:  
Spring Lake 1 Mile  
PO Box 337  
Healdsburg, CA 95448

\*A copy of your current USMS registration card must accompany entry

\*Make checks payable to: REDWOOD COAST USLA

\$50 RACE DAY REGISTRATION- 7:30 am - 8:30 am on May 16, 2015  
\$65 for both Swims Race Day

VISIT OUR WEBSITE [www.lifeguardsforlife.org](http://www.lifeguardsforlife.org) FOR MORE  
INFORMATION, DIRECTIONS, OR TO REGISTER.

EMAIL: [rdwoodmasters@yahoo.com](mailto:rdwoodmasters@yahoo.com)

PHONE & FAX-LINE: 707.528.4718

PARKING: There is a \$7.00 day use parking fee

AGE GROUP DIVISIONS:

18-24, 25-29, 30-34,35-39,

40-44, 45-49, 50-54, 55-59...etc

AWARDS: Cat 2 suits will render that swimmer ineligible for  
awards. Awards will be given to the overall female and  
male winners and to the first three places in all age groups,  
for each event.

SAFETY: Swim caps will be supplied. It is mandatory that  
these caps be worn. Safety craft and lifeguards on rescue  
boards will patrol the course. Individual escorts are not  
allowed. A cut-off time of 1 hour will be enforced.

EQUIPMENT

Wet suits will render  
that swimmer ineligible for awards. Pullbuoys, leg floats,  
webbed gloves, or other possible speed increasing devices  
are not permitted.

LOCATION: The openwater swim is at Spring Lake Park  
in Santa Rosa, CA. Directions: take Hwy 101 to Hwy 12  
east, turn right onto Mission Blvd, left on Montgomery  
Dr, right on Channel Dr, right on Violetti Rd, and into  
Spring Lake Park.

USMS # \_\_\_\_\_

Club Affiliation (3-4 Letter) \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # \_\_\_\_\_

Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age On Race Day: \_\_\_\_\_

Gender: \_\_\_\_\_

1Mile Time: \_\_\_\_\_

500 Meter Time \_\_\_\_\_

**READ CAREFULLY BEFORE SIGNING**



WAIVER: A LIMITATION OF YOUR LEGAL RIGHTS: I \_\_\_\_\_ hereby apply to enter for participation in the Spring Lake Swims. I agree to hold harmless and safe from liability for myself, my heirs, my executors, and administrators; and waive release and discharge the Redwood Coast Chapter of the United States Lifesaving Association, Redwood Coast Masters, Pacific Northwest United States Lifesaving Association, USA Swimming, State of California, County of Sonoma, and all other sponsors and producers of this event, their agents, representatives, successors, and assignees, from all liabilities, actions, claims, demands, damages, costs, any and all rights, expenses, liability or damage for any and all injuries received or illness incurred or from damage caused by me to anyone else arising out of or in connection with my participation in the Spring Lake Swims. I further expressly recognize that the entry fee does not obligate the sponsors, hosts, or their agents, for the costs of any medical care rendered to me, nor does it constitute a policy of insurance should I become injured or ill during the course of my participation. I further agree that I will defend, indemnify and hold harmless the said sponsor, host, their members, officers, agents, against all claims, demands or causes of action, including court costs and attorney's fees directly or indirectly arising from any or other proceedings brought by or prosecuted for my benefit contrary to this agreement. This release extends to all claims of any kind and nature, whatsoever, whether known or unknown, and I expressly waive any benefits I may otherwise have under Section 1542 of the Civil Code of California relating to the release of unknown claim. In addition to this agreement to the above, I certify and attest that to the best of my knowledge my physical condition and fitness are adequate for me to safely compete in the swim distance mentioned above and that no physician or other qualified individual has advised against my competing in any portion of the swim, or the entire swim itself. I agree to abide by all the rules and regulations of this event.

"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/USA 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. For Open Water Events: In addition, I specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks."

Spring Lake Swim DATE \_\_\_\_\_

Signature \_\_\_\_\_