



PAPER ENTRY FORM

[ONLINE REGISTRATION ENTRIES PREFERRED & ENCOURAGED]

CENTRAL ILLINOIS OPEN WATER SWIM (CIOWS)

1.2-Miles ****2nd Annual**** 2.4-Miles

USMS Great Lakes Zone Open Water Swim (GLOWS) Series Event

Evergreen Lake • Comlara Park • Hudson, Illinois • Saturday, August 6, 2011 (10:00 A.M. CT)

Sanctioned by Illinois Masters Swimming Association (ILMSA) for United States Masters Swimming (USMS), Inc. USMS Sanction: 211-002W

PLEASE PRINT CLEARLY & LEGIBLY [INCOMPLETE PAPER ENTRY FORMS WILL BE REJECTED]

LAST NAME:* _____ FIRST NAME: _____ MI: _____
 STREET ADDRESS: _____
 CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____
 E-MAIL: _____ DAY PHONE: _____ EVENING PHONE: _____
 AGE: _____ Years DATE OF BIRTH: ____/____/____ SEX: _____
 (on August 6, 2011)** (Male or Female)
 EVENT DAY EMERGENCY CONTACT NAME: _____ DAY PHONE: _____ EVENING PHONE: _____
 USMS No.*** _____ USMS CLUB NAME (OR UNATTACHED): _____ USMS CLUB NO. _____

* Print name as it appears on USMS Registration Card. ** 18-year-olds must be 18 on August 6 2011

*** PAPER ENTRY registrant MUST be a USMS Member. Immediate USMS Member registration ONLINE thru [Illinois Masters Swimming Association \(ILMSA\)](http://Illinois Masters Swimming Association (ILMSA)) for \$38.00, at: <https://www.clubassistant.com/club/usms.cfm?!=21>. Otherwise, go to: <https://www.clubassistant.com/club/USMS.cfm>

Before completing, read CIOWS Event Information (www.CIOWS.org and/or www.ClubAssistant.com/CIOWS).

DISTANCE: 1.2-Miles or 2.4-Miles (CIRCLE ONE) WETSUIT: YES or NO (CIRCLE ONE)

PAPER ENTRY FEES:

ITEM	Quantity	Fee	Total
If USPS-postmarked by Sat., July 16, 2011, OR received by Sat., July 23, 2011		\$ 40.00	\$
If USPS-postmarked by Thurs., July 28, 2011, OR received by Thurs., August 4, 2011		\$ 50.00	\$
High Quality Collectible CIOWS Event T-SHIRT			
Small _____ Medium _____ Large _____ XL _____ XXL _____		\$ 14.00 ea.	\$

Total Enclosed: \$ _____

NO RACE DAY ENTRIES. NO WAIT LIST. NO TRANSFERS. NO DEFERRALS. NO REFUNDS.

Make Check Payable To: "Central Illinois Open Water Swim 2011" [Insufficient funds will result in entry being rejected.]

MAIL PAPER ENTRY FORM TO: CIOWS 2011, Attention: John Traynor, Post Office Box 5714, Bloomington, Illinois 61702-5714

RELEASE OF LIABILITY BY PARTICIPANT: 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, ILLINOIS MASTERS SWIMMING ASSOCIATION, INC., THE CLUBS, ILLINOIS MASTERS (the CLUB), CENTRAL ILLINOIS MASTERS SWIM TEAM, INC., USA SWIMMING, INC., ILLINOIS SWIMMING, INC., BLOOMINGTON NORMAL SWIM CLUB, INC., HOST FACILITIES, COUNTY OF MCLEAN (ILLINOIS), HUDSON COMMUNITY FIRE PROTECTION DISTRICT, AMERICAN RED CROSS OF THE HEARTLAND, 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. Finally, I specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

SIGNATURE: _____ DATE: ____/____/____

I have read the CIOWS EVENT MEET INFORMATION provided at this website, www.CIOWS.org and agree to abide by all terms and rules therein. I grant permission for the use of any photographs, videos, recordings, and/or any other record of my activities at Central Illinois Open Water Swim Event for any legitimate purpose.

SIGNATURE: _____ DATE: ____/____/____