



**Common Ground Masters
Keefe Lodwig
“Keep it Short” Swim Meet
Saturday, February 3, 2024**



Short Course Yards (SCY)
USMS Sanction #294-S001

Hosted by: Common Ground Masters.

Location: Common Ground Community Center, 1701 Veterans Drive, Omaha, NE 68022.

Date/Time: Saturday, February 3, 2024. The Masters swim meet will follow the Elkhorn High School Varsity Swimming Invitational that begins at 10:00 a.m. Warm-ups for the Masters meet will start 30 minutes after the Elkhorn High School swim meet ends, and should begin at approximately 4:30 p.m., with the first Masters event beginning at approximately 5:00 p.m. Meet Check-in/Registration table will be available starting at approximately 3:30 p.m. This is the inaugural meet to honor veteran Masters swimmer Keefe Lodwig, who passed away on January 27th, 2022 from ALS, often referred to as Lou Gehrig’s disease. Keefe was a USMS national and world record holder, and an All-American sprint freestyle specialist at the University of Nebraska in Lincoln.

Sanction: Sanctioned by the Nebraska LMSC for USMS, Inc., sanction number 294-S001.

Meet Directors: Craig Kersten, cmkersten@cox.net, Dave Wells, NBWebmaster@usms.org, and Amanda English, Amanda.english@cityofomaha.com

Pool: Eight-lane 25yard pool with backstroke flags and non-turbulent lane markers, Daktronics electronic timing system with touch pads and scoreboard, and spectator seating. Six lanes will be used for competition with two lanes available for warm-up/cool-down throughout the meet. The length of the competition course without a bulkhead is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1.

Rules: Current USMS rules apply. All events are timed finals and will be pre-seeded slowest to fastest with men and women seeded together. All participants must be registered members of U.S. Masters Swimming for 2024. Individual competition is in age groups of 18-24, 25-29, 30-34, 35-39, etc. Relay age groups are 18+, 25+, 35+, 45+, etc. The youngest member of the relay determines your age group. All four swimmers must be registered with the same club for relays. Relays may be mixed genders. Swimmers may enter a maximum of five (5) individual events and two (2) relays. Since the events are shorter distances and there are fewer events, be aware that this meet may run quickly and you might not get much rest between events. Your age as of February 3rd, 2024 determines your age group eligibility.

Entry Information and Fees: Meet entry fee is \$25.00. Meet is open to all 2024 USMS registered swimmers. Entries close on Friday, January 26 (No deck entries). Entry fees are non-refundable.

To enter, complete the entry form and waiver on the next two pages and mail them with a check (make checks out to: “City of Omaha”) and photocopy of your 2024 USMS registration card to the address on the entry form. (*Meet entries will not be processed without a check, completed entry form, AND signed waiver.*) Relay entries will be filled out at the meet. Swimmers can also register for the meet and pay online at the Common Ground Aquatics – City of Omaha Parks and Recreation website:

ENTRY FORM

Common Ground Masters Keefe Lodwig "Keep It Short" Swim Meet (SCY)

Saturday, February 3, 2024 - Common Ground Community Center, Omaha

Sanctioned by the Nebraska LMSC for USMS, Inc., sanction number 294-S001

Name: _____ Sex: ____ Age on 2/3/2024: ____ Date of Birth: _____

Address: _____ City/State/Zip _____

E-mail address: _____ Phone # _____

LMSC/Club: _____ USMS # (for 2024) _____

EVENTS (please circle event # and enter seed time or "NT" for no time. Limit of 5 events.)

EVENT#	EVENT (Short Course Yards - SCY)	SEED TIME
Warm Up 4:00-5:00 PM (approximate)		
1	200y Medley Relay	Sign up at meet
2	200y Free	____:____.____
3	100y IM	____:____.____
4	*50y Free (Keefe Lodwig trophy to fastest 50, male & female)	____:____.____
5	100y Back	____:____.____
6	100y Breast	____:____.____
7	100y Fly	____:____.____
*** 20-minute BREAK / Warm Up ***		
8	200y Free Relay	Sign up at meet
9	200y IM	____:____.____
10	100y Free	____:____.____
11	50y Back	____:____.____
12	50y Breast	____:____.____
13	50y Fly	____:____.____

Swimmers may enter a maximum of five (5) individual events and two (2) relays. However, since the events are shorter distances and there are fewer events, please be aware that this meet may run quickly and you might not get much rest between events. Relay entries will be filled out at the meet.

Mail this completed entry form AND the signed waiver form on the next page and mail it with a check (Make checks payable to: "City of Omaha") and photocopy of your 2024 USMS registration card to:

Common Ground

Attn: Craig Kersten, Masters Swim Coach

1701 Veterans Drive

Omaha, NE 68022



PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and/or related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

- I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
- I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
- I agree to be familiar with and to abide by the Rules and Regulations, including the [Code of Conduct](#) and any safety regulations established by USMS. I accept sole responsibility for my own conduct and actions while participating in the Events.
- I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19, or other viral or bacterial infection, while participating in any of the Events, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I agree that if I have a fever, cough, feel short of breath, have any other symptoms, have knowingly been exposed to a communicable disease such as COVID-19 I agree not to participate in USMS activities for a minimum of 10 days from the date the symptoms started, until the symptoms have subsided or I have been cleared by a doctor. If I test positive for COVID-19 within 10 days following participation in a USMS activity, I will notify the USMS event director, coach or club administrator immediately.
- I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
- I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (check) M F	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant			Date Signed	

Revised 09/21/2023