

**HURRICANE-MAN 2.4 MILE ROUGH WATER SWIM
PASS-A-GRILLE CHALLENGE 1000 METER SWIM
SATURDAY, MAY 8, 2010**

HOSTED BY: ST. PETE MASTERS & ST. PETERSBURG AQUATICS

Sanctioned by Florida LMSC for USMS, Inc. - Sanction #140-016ow
Sanctioned by Florida Swimming for USA Swimming, Inc. - Approval#A-5112

Date & Time: May 8, 2010 7:15 AM – 1000 Meter; 7:30 AM – 2.4 Mile

Location: Check-In/Packet Pick-up – Beachside of Hurricane Restaurant,
807 Gulf Way, St. Pete Beach

Eligibility & Rules: Open to all registered USMS members and all registered USA Swimming members. **ATTACH COPY OF 2010 REGISTRATION CARD TO ENTRY FORM.** One event USMS membership is available for swimmers over age 18. No refunds due to race cancellation. No wetsuits or fins. Younger swimmers require permission from coach to participate.

Officials: Dan Nardozzi, Kevin Mooren, Steve Freeman, Mike Halfast

Entries: Swimmers must pre-enter by mail. **NO RACE DAY REGISTRATION.** Maximum of 400 entries accepted. \$35.00 for USA/USMS registered members, \$54.00 for unregistered members over age 18. **ENTRIES MUST BE POSTMARKED BY APRIL 28, 2010.** Entries postmarked after this date and received by May 6, 2010 will be accepted but only with **\$10.00 LATE FEE INCLUDED.** No entries will be accepted after 7:00 PM on May 6, 2010. **Checks payable to St. Pete Masters** and mail to:
Hurricane Man c/o Patty Nardozzi
6346 – 27th Avenue North, St. Petersburg, FL 33710

Registration confirmation: Visit www.stpetemasters.org for entry list

Awards: Overall male/female USMS & USA & Top 5 age-group finishers

Sponsor/Breakfast: Hurricane Restaurant famous post-race breakfast included with entry. Spectators can buy passes for \$10.00 at the door.

Race Schedule:
6:00am-6:45am – Check-in, packet pick-up and body marking
7:15am – 1000 Meter race start (North end of beach at 22nd Avenue)
7:30am – 2.4 mile race start (County Park at 4700 Gulf Boulevard – across from Dolphin Village Shopping Center)
8:15am – Official end of 1000 meter race
8:45am (approx.) – Awards for 1000 meter race – 2nd floor restaurant
9:30am – Official end of 2.4 mile race – **2 HOUR TIME LIMIT**
10:00am (approx.) – Awards for 2.4 mile race – 2nd floor restaurant

Parking/Transportation: Free parking for first 60 cars available behind restaurant; meter parking \$1.00 per hour after 8:00am. Shuttling available to 2.4 mile race start.

Information: Patty Nardozzi, pnardozzi@hotmail.com or 727-343-5960

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Last Name: _____ First: _____ MI: _____ (as it appears on registration card)
Sex: _____ Birthdate: ___/___/___ Age: _____ USA/USMS # _____ Team: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____ Cost: \$35.00 (reg) \$54.00 (oevt) \$10.00 (late fee)

IMPORTANT! – Circle all that pertain to your application! CHECK PAYABLE TO: SPM
Race: 2.4 Mile 1000 Meter T-Shirt Size: S M L XL Due: \$35.00 \$54.00 \$10.00

USA SWIMMING: 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 USA Swimming (training and competition), including possible permanent disability or death, and agree to assume all those risks. AS A CONDITION OF MY PARTICIPATION IN THE USA SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: USA SWIMMING, INC. THE LOCAL 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 USA Swimming. I also specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

SIGNATURE OF PARTICIPANT: _____ **DATE:** _____
(USA Swimming participant or parent if under 18 years of age)

MASTERS SWIMMING: 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 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 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. I also specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

SIGNATURE OF PARTICIPANT: _____ **DATE:** _____
(USMS participant must be 18 years or older)

2010 USMS ONE EVENT MEMBERSHIP APPLICATION – EVENT DATE 5/8/10

Last Name: _____ First: _____ MI: _____ Today's Date ___/___/___
Address: _____ City: _____ State: _____ Zip: _____
Phone #: _____ E-Mail: _____ Birthdate: ___/___/___ Age: _____ Sex: _____

Cost: \$54.00 (\$19.00 credit towards one-year USMS membership if you join team within 30 days)

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. I also specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks.

SIGNATURE OF PARTICIPANT: _____ **DATE:** _____

Attach copy of USA/USMS registration card to this form. Mail to: SPM c/o Nardoizzi, 6346 – 27th Avenue No., St. Pete, FL 33710