



FALL 2024 BUFF INVITE



**Broomfield Community Center Pool
September 28, 2024**

Hosted by Colorado Swim & Dive

MEET INFORMATION PACKET

MEET ADMINISTRATION

Buff Invite - Fall 2024

September 28, 2024

Facility Address:

Broomfield Community Center
280 Spader Way
Broomfield, CO 80020

Facility

9 competition lanes, 25 yard pool
6 warm up/down lanes, 25 yard pool
Automatic timing system with touchpads
Backup manual timers
1 meter springboard

Contact:

Madison Lin and Drew Aparicio
Co - Presidents

madison.lin@colorado.edu

drew.aparicio@colorado.edu

(303) 523-0852, (303) 986-6331

Kimberly Goodell and Martin Zamora
Head Swim Coach and Head Dive Coach

Kimberly.Goodell@colorado.edu Martin.Zamora@colorado.edu

(925) 301-3338, (303) 304-5707

ORDER OF EVENTS

Warmup 12:30 pm
Meet Start 2:00 pm

Women	Event	Men
1	200 Medley Relay	2
3	200 Free	4
5	200 IM	6
7	50 Free	8
9	100 Fly	10
11	50 Back	12
13	100 Free	14
Dive Warmup		
15	1 Meter Diving	16
20 min Swim Warmup		
17	50 Breast	18
19	500 Free	20
21	50 Fly	22
23	200 Free Relay	24
25	100 Back	26
27	100 Breast	28
29	100 IM	30
31	400 Free Relay	32

MEET INFORMATION

Eligibility

Buff Invite is open to all college club collegiate teams (registration with College Club Swimming is highly encouraged). Entries will be open to all individual US Masters registered swimmers.

The length of the competition course is in compliance and on file with the USMS in accordance with articles 105.1.7 and 106.2.1. Times will be eligible for USMS records and Top 10 consideration, but not for world records.

Entries

Athletes may enter up to four (4) individual events. There are no limits on the amount of relays an individual may swim, and no limit on how many relays a team can enter. The limit is a total of eight (8) combined events per individual.

Collegiate Teams:

- A Hy-Tek file will be provided in advance. Entries are due to swimdivecolorado@gmail.com due Wednesday, September 25th at 11:59pm.
- Entry fee is \$20 per swimmer or diver.

Masters Swimmers:

- Please submit the USMS event entry form and the USMS waiver along with your current membership card to swimdivecolorado@gmail.com by Wednesday, September 25th at 11:59pm.
- Entry fee is \$25 per master swimmer.

Entry Fees:

- Will be paid through an online portal. The link to this online portal will be sent out closer to the meet.

Rules

Rules will be enforced in accordance with the [U.S. Masters Swimming Rule Book](#)

Lodging

Broomfield and the surrounding area offer many options for lodging, follow the link for current listings. [Hotels in Broomfield](#)



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 <input type="checkbox"/> F <input type="checkbox"/>	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant			Date Signed	

Revised 09/21/2023

COLORADO LOCAL MASTERS SWIMMING COMMITTEE – CONSOLIDATED ENTRY CARD

Swimmer's Name _____ **Age:** _____ **Male:** _____ **Female** _____

USMS # _____ **Birthdate** / / **Phone ()** _____

Event #	FREE (Submitted Time)	Event #	BACK (Submitted Time)	Event #	BREAST (Submitted Time)	Event #	FLY (Submitted Time)	Event #	I.M. (Submitted Time)
	50 : .		50 : .		50 : .		50 : .		100 : .
	100 : .		100 : .		100 : .		100 : .		200 : .
	200 : .		200 : .		200 : .		200 : .		400 : .
	400/500 : .	MEET NAME & DATE: Spring 2024 Buff Invite CLUB IF NOT COLORADO: _____ TEAM NAME: _____				MEET FEES # of Events X \$ _____ = \$ _____ Surcharge = \$ _____ TOTAL = \$ 35.00			
	800/1000 : .								
	1500/1650 : .								
T-shirt Size (if applicable): S M L XL XXL									