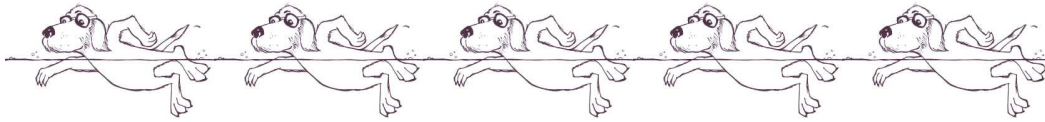




Sponsored by: [Pacific Masters Swimming](#)



Open Water 101

A clinic for new and developing open water swimmers

Sunday, July 25, 2010

Time: Check-in 7:30 - 8 a.m.

Clinic: 8 - 11 a.m.

Location: Shadow Cliffs, Pleasanton, East Bay Regional Parks

Limited to 50 swimmers.

Training includes

- Dry land talk. **Suzanne Heim-Bowen**
USMS/PacMasters OW Champion
- In-water drills. Breathing and sighting techniques, coping with panic, pack swimming, water entry and exit
- Optional course swim (700 yards or less).
Water temperature: 70-74 degrees. Wetsuits are welcome.

Entry requirements

- Must be able to swim ½ mile in 30 minutes or less.
- Must be a member of USMS/Pacific Masters Swimming

Indicate estimated ½ mile swim time on entry; number of OW swims completed if any. Send entry form, a photocopy of 2010 USMS card, signed release and a check payable to Pacific Masters Swimming to: Open Water 101, c/o Carroll, 21 Windsor Ave., San Rafael, CA 94901.

Directions: Shadow Cliffs, 2900 Stanley Blvd, Pleasanton. From I-580 in Pleasanton: take the **Santa** Rita Road/Tassajara Road Exit and turn south, towards Pleasanton. Continue southward **on** Santa Rita Road to the intersection of Santa Rita Rd and Valley Avenue. Turn Left onto Valley Avenue. At the intersection of Valley Avenue and Stanley Boulevard, turn left onto Stanley Boulevard. Proceed on Stanley Boulevard to the first stop light; the park entrance is on the right. Entrance fee/parking: \$6.00

Clinic Director: Glenda Carroll Email: gccarroll@sbcglobal.net, 415-454-6327

Entry Information

No registration on clinic day. Everyone must be pre-registered.

For USMS members: \$40 for entries postmarked by July 17, 2010.

\$45 for late entries.

For non-USMS members:

___ \$40 entry fee

___ \$45 late entry fee

___ \$25 one-day USMS membership (Can be converted to full membership within 30 days.) --Or --

___ \$42 USMS/PMS membership. Go to www.pacificmasters.org for application.

_____ Total fee

Entry Form Mail entry form, signed release, copy of 2010 USMS card, check payable to PMS to: **Open Water 101**, c/o Carroll, 21 Windsor Ave., San Rafael, CA 94901. To join USMS, contact Registrar Nancy Ridout at 415-892-0771 or go to PMS website, www.pacificmasters.org.

Name	USMS Number:	
	USMS One-Day Registration	
	Yes _____ No _____	
Street	Email	
City	State	Zipcode
Phone	Age	Male Female
Club		
½ mile estimated OW time:	I have competed in _____ swims. (Fill in number of swims.)	
Anything else you want to tell us?		

PLEASE READ CAREFULLY AND SIGN BELOW:

"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., USA-S, THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, EBRPD, 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."

Name

Date
