



DATE & TIME:	Sunday, July 29th, 2007 Check-in: 7:30–8:30am Race Instruction: 8:45am Race Start: 9:00am	LOCATION: Kapalua Bay, Lower Honoapiilani Road, Near Kapalua® Resorts Lo Tide 8:9am -0.2ft Hi 3:44pm 2.66ft.
-------------------------	--	---

AWARDS:	Men & Women 10 & Under, 11-12, 13-14. 15-18. 19-24, etc. to 60+. Overall top male & female engraved on plaque at Upcountry Pool.	COURSE & DISTANCE:	Approx 1 mile. The course goes straight out from Kapalua Bay and turns left to Napili Bay & back . The Napili Bay section will be a triangle course, and then returns to Kapalua Bay.
ENTRIES:	\$15 postmarked by 7/23/07; \$20 after to: Maui Masters Swim Club PO Box 696 Pu'unene, HI 96784	PARKING:	Event parking available at public access parking lots on Lower Honoapiilani Road near the Kapalua® Resorts. Look for event parking signs on the morning of the race. No parking available at Napili Kai.
PROCEEDS:	In memory of Maui Master's past president Brian Boelter, first \$500 up to half of net will benefit a charity related to his life interests in his name.	ESCORTS & EQUIPMENT:	Participants under 19 may have an escort, but drafting the escort is not allowed. No other participants may have escorts. No hand paddles, fins or flotation gear permitted. Only goggles, face masks and/or snorkels are permitted. Course will be closed 75 minutes following the start. Swim caps are requested, please bring your own.
INCLUDED:	Awards for all ages. Post race refreshments.	CONTACTS:	Dave Rostetter (808) 572-6932 kapuaiDaveR@aol.com or Malcolm Cooper (808)280-4257 malcolmy@email.msn.com .
SANCTION:	Hawaii Masters Swim Association for USMS #S397-_____ USA Swimming #HI2007-pending	ELIGIBILITY:	All participants must be members in good standing with United States Masters Swimming, Inc. or USA Swimming, Inc. Swimmers 19 & over who are not registered can sign-up with USMS on race day. One year USMS membership (valid thru 12/31/06) is \$25. One day \$10.

Name				USA/USMS#		
Address	Street _____			Birthdate		
	City _____	State _____	Zip _____	Race Age		Sex
Phone	Home _____		Cell _____ (in case we need to contact race day)	Last Open Water Swim		
Payment	Amount _____			email		
	Cash	Check	#			

WAIVER: All swimmers must sign the appropriate liability waiver below in order to participate. If registered as an athlete member of both USMS and USA swimming, you may only swim for one indicated by your USMS/USA number above.

USMS Waiver
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. 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: _____

USA Swimming Waiver (Parent or legal guardian must also sign for swimmers under 18.)
I hereby release USA Swimming, the Local Swimming Committee (LSC) and any other participating organization from any claims and damages received by me as a result of my participation in the race and furthermore, hold them harmless and indemnified from any damages. In addition, I agree to abide by and be governed by the rules of USA Swimming.

Signature _____ Date: _____ Signature of Parent of Guardian _____