



# 2025 Ozark LMSC Short Course Meters Championship

**Saturday, November 15, 2025**

Hosted by St. Louis Area Masters Swimming, Inc. (SLAM)  
Sanctioned by Ozark LMSC for USMS, Inc. Sanction #225-S005



**Location:** Chuck Fruit Aquatic Center, 6168 Center Grove Rd., Edwardsville, IL 62025

**Course Description:** The competition course length is 25 meters; the pool length is 50 meters, with movable bulkheads. There are five (5) Short Course Meters competition lanes, one (1) buffer lane, and two (2) warm-up/down lanes.

**The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 106.2.1, but as a bulkhead course, is subject to length confirmation. Eligibility of times for USMS Top 10 and Records is contingent on verification of bulkhead placement.**

**Warm-up Time:** 11:00 am

**Competition Start Time:** 12:00 pm

**Continuous Warm-up:** Two SCM lanes; also, a separate 8-lane SCY pool is available during the meet.

**Timing System:** The primary timing system will be Automatic timing. Times from this competition will be eligible for world record, USMS record, and Top 10 consideration.

**Meet Director:** Maryanne Barkley, barkleymaryanne@gmail.com

**Meet Referee:** Stephanie Petersen, legos-lb@sbcglobal.net

**Meet Registrar:** Jeff Enge, jpenge358@gmail.com

**Rules & Eligibility:** Current USMS rules will govern the meet. On meet day, all participants must be 18 or older and have proof of current membership in U.S. Masters Swimming or another World Aquatics federation. Register with any USMS Local Masters Swimming Committee (LMSC) online at <http://www.usms.org/reg/>; to join the St Louis area LMSC, select “Ozark LMSC” (not Missouri Valley or Illinois), and then join a Club or be Unattached.

**Age Determination Date:** The swimmer’s age on December 31, 2025.

**Age Groups for Individual Events:** 18-24, 25-29,...in 5-yr increments as high as needed.

**Age Groups for Relays:** determined by the aggregate age of the four relay team members: 72-99, 100-119, 120-159, 160-199, 200-239, and up in 40-year increments as high as necessary. Age of each team member is age as of December 31 of the current year.

**Relays:** *Unattached swimmers cannot swim relays.* Individuals may swim for only one relay team in each relay event. Teams are either 4 MEN or 4 WOMEN or 2M+2W/MIXED; teammates must be registered with the same Club. Online registration includes Relay events, the Meet Registrar will email entrants to help create teams; please email any already created team lineups to [jpenge358@gmail.com](mailto:jpenge358@gmail.com). No fees are charged for relays, and relay-only swimmers must complete an individual meet entry.

**Online Entry Procedure:** [www.swimslam.org](http://www.swimslam.org) ***NO PAPER, DECK, OR EMAIL ENTRIES ACCEPTED***

**Entry Deadline for Individual and Relay Events:** Noon, Friday, November 14, 2025

**Entry Limits:** Participants are limited to five (5) individual events. All events are timed finals and seeded slowest to fastest; genders may be seeded together at the discretion of the meet referee.

**Entry Fee (*non-refundable*):** \$30 - online entry credit card charge from “Pay Pal”

**Meet-Day Entry:** No individual or relay meet-day entry is allowed; entry is online only at [swimslam.org](http://swimslam.org)

**Positive Check-in Deadline:** before Event #16 (for Event #22/800M Freestyle & Event #23/1500M Freestyle)

**Driving Directions:** Chuck Fruit Aquatic Center, 6168 Center Grove Rd., Edwardsville, IL 62025

I-270 @ Exit #9: Hwy 157 North, continue 3.5 miles; right on Center Grove Rd, right at EHS Sports Complex stoplight.  
I-55 @ Exit #23: West 143 to Governors Pkwy 4 miles; left on ESIC Dr, right on Center Grove, left at EHSSC stoplight.  
Chuck Fruit Aquatic Center & parking is the first left. A pedestrian tunnel connects CFAC to nearby lodgings.

**Lodging:** *Walking Distance to Pool (Edwardsville):* Holiday Inn Express, 1000 Plummer Dr, 618-692-7255; Country Hearth Inn & Suites, 1013 Plummer Dr., 616-656-7829; TownePlace Suites, 6101 Center Grove, 618-655-3001.

*Within Ten Miles:* Comfort Inn & Suites, 3080 S. Hwy 157, Edwardsville, 618-656-4900; Hampton Inn, 5723 Heritage Crossing Dr, Glen Carbon, 618-589-5000.

**WORKSHEET for ONLINE ENTRY FORM**  
**2025 Ozark LMSC Short Course Meters Championship - Sanction #225-S005**  
**Saturday, November 15, 2025 – Meet starts 12:00 pm**

**ENTRY DEADLINE: Noon, Friday, November 14, 2025**

<b>Information required for online entry:</b>	
Name - as listed on 2025/26 USMS registration Address, City, State, Zip Phone Number Email Address Emergency Contact Name & Phone	Birth Date Age on December 31, 2025 Gender USMS Number Club Affiliation

**ORDER OF EVENTS**

**SEED TIME REQUIRED** – Actual or Estimated Short Course Meters Time

**Seeding Method:** slow to fast by time without regard to age or gender

Maximum Entry – 5 events

#	Event Short Course Meters	Seed Time	#	Event Short Course Meters	Seed Time
1	100M Freestyle		12	200M Breaststroke	
2	200M Butterfly		13	50M Backstroke	
3	50M Breaststroke		14	100M Butterfly	
4	Relay 200M Medley M - W - X		15	Relay 200M Freestyle M - W - X	
5	400M Freestyle		16	100M Individual Medley	
6	100M Breaststroke		17	400M Individual Medley	
7	200M Backstroke		18	200M Freestyle	
8	Relay 400M Freestyle M - W - X		19	100M Backstroke	
9	50M Butterfly		20	50M Freestyle	
10	200M Individual Medley		21	Relay 400M Medley M - W - X	
11	Relay 800M Freestyle M - W - X		22	800M Freestyle	
	15-Minute BREAK* SLAM meeting		23	1500M Freestyle	

*\*Additional breaks may be taken depending on the number of entries*

**The 800M FR & 1500M FR require positive check-in before Event 16; Heats seeded/published as soon as possible.**

**Location of Heat Sheets/Results:** Heat sheets & Results will be emailed to registered swimmers & posted on walls.

**Awards:** No awards are given for this competition.

**Facility:** The elevated viewing area can seat 499 spectators, the pool level seats 220 coaches and swimmers.

**Facility Restrictions on Cameras & Video:** Prohibited behind the blocks and in locker rooms.



**By entering the 2025 Ozark LMSC Short Course Meters Championship Swim Meet,  
 I agree that Online Entry includes Electronic Signing of the USMS Participant Waiver  
 (r.10/30/24)**



## 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); Grown-Up Swimming meets or workouts; 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");

1. 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.
2. 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, viral or bacterial infection including but not limited to COVID-19, 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.
3. 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 and acknowledge that violations of the code of conduct may result in disciplinary action up to and including suspension of USMS membership.
4. 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, contractors, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USA Swimming Foundation; Grown-Up Swimming, LLC; 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.
5. 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.

First Name	Last 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 10/30/2024