

*Our Mission: To prevent and cure diabetes and to improve the lives of all people affected by diabetes.*

## PENNOCK ISLAND CHALLENGE

August 15, 2010 start time 10:00 am  
Ketchikan Alaska, est. 2004

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Sanctioned Alaska masters for USMS INC #  
2010 OFFICIAL RELAY ENTRY AND ROSTER FORM  
(Complete all sections; copies will be accepted)

RELAY TEAM NAME: \_\_\_\_\_

**DIVISION** (circle one): Male/Female/Mixed

**Number of People** (circle one): 2 or 4

**Wetsuit Division** (circle one): YES / NO

### Emergency Contact

Name \_\_\_\_\_ Phone: \_\_\_\_\_

### Relay Contact Information:

Team Captian: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### TEAM MEMBER NAMES

Name First and last	AGE	Gender (M/F)	t-Shirt Size (sm,med,lg,xl,xxlg)	Master or Equ. #	Time for 2K swim

**ESCORT BOATS:** Do you require assistance in locating an escort boat and kayaker? (Please circle one)  
YES    NO

### If you already have an escort boat or kayaker, please complete the following:

Captain/Owner: \_\_\_\_\_ Address: \_\_\_\_\_

Name of boat: \_\_\_\_\_ Telephone Number: (    ) \_\_\_\_\_

**Questions:** Please contact William Schulz [pennochchallenge@hotmail.com](mailto:pennochchallenge@hotmail.com) or (907)617-7499

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**LIABILITY RELEASE FORM**  
**Pennock Challenge August 15 2010**

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 Ocean 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. AMERICAN DIABETES ASSOCIATION, THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. I agree to abide by and be governed by the rules and regulations as specified. Finally, I specifically acknowledge that I am aware of all the risks inherent in open water swimming, and agree to assume those risks.

1. SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ D.OB \_\_\_\_\_
2. SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ D.OB \_\_\_\_\_
3. SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ D.OB \_\_\_\_\_
4. SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ D.OB \_\_\_\_\_

**RULES FOR ENTRY**

1. Entry will only be accepted when all requested information is complete on the entry form. Sending in an incomplete entry form does not hold a place for the relay. The relay is entered when the form is complete and accepted.
2. Incomplete entry forms will be sent back to the registrant.
3. Swimmers must have a current masters or international equivalent number.
4. Send a copy of current USMS or international cards with entry. If the card is not included the entry is not valid.
5. Name and contact information of Kayaker and Skipper if you have one otherwise circle (No) above. If you require assistance in getting an escort boat and/or kayaker please circle (yes) above.
6. Relay substitutions will be allowed up to one week before the event.
7. Relays will consist of 2 or 4 person, there are no 3, 5 or 6 person teams.
8. No person under the age of 18 can compete as a solo or member of a relay.