Nebraska Masters
Short Course Yards (SCY) December Splash
Nebraska Masters Annual Meeting
Dillon Family Aquatics Center. Fremont, NE
Sunday December 7th, 2025

Location: Fremont Family YMCA. Fremont, Nebraska. 810 N Lincoln Ave. 68025
Meet Director: Miranda Long - mirandal@fremontfamilyymca.org
Register: You can register by mail or email with the entry form. Online registration will be available. Make sure you enter all events and times accurately. Early mail-in registration will end December 1st (Example: Event 6 Women's 50 Free – 38.90). Enter "NT" if you do not have a time. $60-Late Payment will be accepted after December 1st and the day of the meet before warm-ups.
Facility: Dillon Family Aquatics Center is in Fremont, Nebraska. The pool has a total of 12 lanes Short Course Yards (SCY). The meet will be swum SCY, with 8 lanes used for competition. Colorado Timing System with automated touch pads at the start end only, electronic button timers for back up. Lane Zero and lane eleven on the outside of the pool will be open for continuous warm up/cool down.
Time: Early check in for 1650 begins at 6:30 am, warm ups will begin at 6:45 am and the 1650 will begin at 7:30 am. Entries for the 1650 are limited to first 8 entries. Check-in begins at 8:15 am for the rest of the meet. Deck entries close firmly at 8:30 am. First warm-up is 8:30am – 9:15 am. Following the 1650, the Meet will begin at 9:30am.
Eligibility: US Masters Recognized meet, Recognition number
Rules: The current USMS rules will govern the conduct of the meet. Heats will be seeded, slowest to fastest. Please enter a goal time for accurate seeding. Entries with no times will be seeded in the slowest heats. Results will be broken out by age group and gender (i.e. Men/Women, 19-24, 25-29, 3034, 35-39 etc.).
NOTE: Your age for this meet is your age on 12/07/2025.
Entry Fees: $40 Early Entry fee. Late Entry Fee after December 1st will be $60. You can swim up to a Maximum of 6 individual events total, relays not included. Relays will be $5 per swimmer. Deck entries for up to 6 events the day of the meet = $60. Please pay with Cash or Check or Card.
Limits: The 1650 will be held first with early warm ups starting at 6:45 am, 1650 will start at 7:30. Swimmers may swim up to six events not including relays. Please be aware that this meet will run fast. If you enter back-to-back events, your rest time will be very short (or nonexistent).
Deadline: Register by e-mail to mirandal@fremontfamilyymca.org by midnight Sunday, November 30th, 2025 for the early entry fee. Late and deck entries will be accepted at the meet by 8:30am at the $60 rate.
Nebraska Masters Annual Meeting: The Annual Meeting will be held after the meet. Food and beverages will be provided.

ORDER OF EVENTS – Short Course Yards

Event 1= 1650 – Mixed **(Break)**
Event 2= Women's 200 Medley Relay
Event 3=Men's 200 Medley Relay
Event 4=Mixed Medley Relay
Event 5=Women's 50 Back
Event 6= Men's 50 Back
Event 7= Women's 100 Fly
Event 8= Men's 100 Fly
Event 9= Women's 200 Breast
Event 10= Men's 200 Breast
Event 11= Women's 50 Free
Event 12= Men's 50 Free
Event 13= Women's 100 IM
Event 14= Men's 100 IM
Event 15= Women's 200 Free
Event 16= Men's 200 Free
Event 17= Women's 50 Breast
Event 18= Men's 50 Breast
Event 19= Women's 100 Back
Event 20= Men's 50 100 Back
Event 21=Women's 200 Fly
Event 22= Men's 200 Fly
Event 23=Women's 500 Free
Event 24=Men's 500 Free

BREAK

Event 25=Women's 200 IM
Event 26=Men's 200 IM
Event 27=Women's 200 Free Relay
Event 28=Men's 200 Free Relay
Event 29= Mixed 200 Free Relay
Event 30=Women's 50 Fly
Event 31=Men's 50 Fly
Event 32=Women's 100 Breast
Event 33=Men's 100 Breast
Event 34=Women's 200 Back
Event 35=Men's 200 Back
Event 36=Women's 100 Free
Event 37=Men's 100 Free
Event 38=Women's 400 IM
Event 39=Men's 400 IM

Nebraska Masters December Splash (SCY)
EARLY REGISTRATION AND PAYMENT
Dillon Family Aquatics Center. Fremont, NE
Sunday December 7th, 2025

$40 fee for up to 6 events (not including relays)
Name: _____
Age: _____ DOB: _____
Email: _____
Emergency Contact: _____ Phone: _____
If you are a USMS member, provide USMS number and Club _____
Event # Description Time

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Relays: will be paid and entered day of meet, $5 per swimmer.
● Please make check made payable to Fremont Family YMCA
Mail checks to:
Attn: Miranda
Fremont Family YMCA
Dillon Family Aquatic Center
810 N Lincoln Ave.
Fremont, NE 68025
FREMONT FAMILY WAIVER: In consideration of your acceptance of my entry, I hereby from myself, my heirs and executors, waive and release any and all rights and claims for damages against the Fremont Family YMCA, all sponsors, meet officials, volunteers and workers from any injuries suffered by participant listed above in connection with the event. I further certify that the above parties are in good enough physical condition to participate in the event.

Signature_____ Date_____

U.S. Masters Swimming Championship Event Waiver

U.S. MASTERS SWIMMING

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☐ F☐	Date of Birth (mm/dd/yyyy)
Street Address, City, State, Zip				
Signature of Participant			Date Signed	

Revised 10/30/2024