OPEN WATER: 800 yd, 1 & 2 mile, 10K SWIM KEY WEST, JUNE 14, 2025

Date and Time: Saturday, June 14, 2025

Check-in at 9am-9:50am, Race starts at 10:00am

Location/Course: The Atlantic Ocean at Higgs Beach. Start in swimming area and swim around

buoys located in swimming area.

Events: Division: Distance: Age groups: See Below 800 yd swim Male Female See Below Female 1 mile Male See Below Male Female 2 mile

Mermaid Tail Male Female 1 mile 2 mile Monofin Male Female 1 mile 2 mile 2 mile

Awards: Trophies for top 4 swimmers in each age group category:

8 & U, 9-10, 11-12, 13-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49,

50-54, 55-59, 60-64, 65-69, and 70 & Over

Entry Fees: \$45.00 per person for 800 yd, 1 mile, 2 mile. (includes sway bag, t-shirt &cap)

\$5 discount for USA or USMS members.

Make check payable to: The College of the Florida Keys.

Entry Forms: Mail completed forms and check to:

The College of the Florida Keys

Attn: Lori Bosco 5901 College Road Key West, FL 33040

Safety: Lifeguards and kayaks will be positioned throughout the course.

Information: Lori Bosco at (305) 809-3562 or lori.bosco@cfk.edu

www.swimaroundkeywest.org

Official Entry Form: OPEN WATER SWIM: June 14, 2025

All swimmers must complete this form and sign a release.

Entry fee: each swimmer is \$45 (swag bag, shirt and swim cap)

Discount of \$5 for USMS or USA-S swimmers

Check in: 9am-9:50am Race Start 10:00am FIRST Address City Zip Age: Birthdate Male Female Phone () ____() __ **Emergency Contact** NAME PHONE CIRCLE EVENT CATEGORY AND DIVISION: Circle Event: 800 yd swim 1 MI 2 MI 10K ***Circle Category: Mermaid Tail Monofin Special Olympics Circle Age group: 8 & U 9-10 11-12 13-14 15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70 & Older T-Shirt Size: YouthS YouthM XL AUTHORIZATION AND EVENT PROMOTION: I agree to be filmed and photographed by the official and authorized photographers of this event under the conditions authorized by the Meet Director, and give the event organizers the right to use my name, picture, likeness, and biographical information before, during, and after the period of my participation in this event to promote the event in which I compete or to promote the success of the team in which I competed. I will not promote third party sponsors, causes, or charities unless pre-approved by the Meet Director. LIABILITY RELEASE: 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 United States Swimming (training and competition) including possible permanent disability or death and agree to assume all of those risks. Competition. AS A CONDITION OF MY PARTICIPATION IN THIS 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: THE COLLEGE OF THE FLORIDA KEYS, CITY OF KEY WEST, MONROE COUNTY, EVENT DIRECTOR, EVENT SPONSORS, EVENT COMMITTEES OR ANY INDIVIDUAL OFFICIATING AT THE MEET OR SUPERVISING SUCH ACTIVITIES. In addition, I also specifically acknowledge that I am aware of all the risks inherent in open water swimming and agree to assume those risks. Finally, I understand that there will be no refunds given for any reason including event cancellation. Swimmer's Signature Date: Parent's Signature Date: (Required for swimmers under the age of 18)