

The Down East Family YMCA
Bill Reeve Echo Lake Swim
Saturday, August 15th 2015

8:30 am registration.

10:00 race starts (500 yard followed by 1.5 mile).

Race begins at Camp Beech Cliff

Directions: From Ellsworth head south on Rt 3 towards MDI.

**At the head of the island, bear right onto 102. Turn right onto 102N just past the
Somesville Fire Station. Take first left onto Beech Hill Rd.**

Camp Beech Cliff is 2.3 miles down on the left.

**There is a 500 yard swim followed by a 1.5 mile swim. Awards, swim cap and
picnic are included in the registration. A T-shirt is included for the 1st 50
registrants. Those registering on the day of the race may order a t-shirt for \$5.**

Family and friends are invited.

Please include \$3 per non-swimmer who will be attending the picnic.

Registration fee: \$20 for 18 & under

\$30 for 19 & over

\$60 family registration (2 adults and kids)

Contact Matt Montgomery at mmontgomery@defymca.org

The Down East Family YMCA's Annual Echo Lake Swim

Saturday, August 15th, 2015 .

Name _____ E-mail _____

Address _____ Home Phone _____

Age ____ DOB _____ Gender: M F T-shirt size: S M L XL Race: 500 yard 1.5 mile

Number attending swimmer (not including swimmer): _____ (x \$3) Total enclosed: _____

Please make check out to: Down East Family YMCA

Send payment to: DEFY, attn: Matt Montgomery, P.O. Box 25, Ellsworth, ME 04065

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 Open Water Swimming including possible permanent disability or death and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE ECHO LAKE SWIM AND ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES INCLUDING THOSE CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: DOWN EAST FAMILY YMCA, ACADIA NATIONAL PARK, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES."

Signature of Participant or Guardian

Date