

**Fort Atkinson Swim Team**  
**A-B-C Fall Frenzy 2004 Saturday, November 20, 2004**  
**Sanction # 2004-136WI**

**LOCATION:** The Fort Atkinson High School swimming pool  
925 Lexington Blvd.  
Fort Atkinson, WI 53538

**WARMUP AND STARTING TIMES:** Meet will start at 9:00 am. Nov. 20<sup>th</sup>, 2004  
**Warm-ups for the am session will be from 8:00 – 8:55 am.**  
First ½ hour Circle swim all lanes.  
Second ½ hour Circle swim lanes 1,2&8  
Push/Pace 50's lanes 3 & 7  
One way sprints lanes 4, 5 & 6  
Procedure will be repeated for the afternoon session.  
**Warm-ups for the afternoon session will not begin before 12:30pm.**  
A coach from your team must be on deck during Warm-ups. Swimmers not following warm up Procedures could be disqualified at the discretion of the meet officials.

**POOL:** **Eight lanes, 25 yards** flush deck, non-turbulence  
Lane markers and backstroke flags, with 30”  
Height starting blocks. Pool is 8 feet deep at  
Starting blocks.

**MEET DIRECTOR:** Brian Hancy  
W8234 Stockbridge Ct.  
Lake Mills, WI 53551  
H 920-648-5990  
E-mail: [BHANCY@CHARTER.NET](mailto:BHANCY@CHARTER.NET)

**TIMING:** Colorado Timing System 5 with 2 manual stop  
watches/lane as timed finals.

**ENTRIES:** Meet waiver and **entries should be received by Nov. 13th, 2004.**  
**Entries via Hy-Tek Commlink are very highly en-couraged.**  
Use of **e-mail is Highly Encouraged**, but hard copy with disk is  
necessary, e-mail to [BHANCY@CHARTER.NET](mailto:BHANCY@CHARTER.NET) . Swimmers may  
“swim up” in age to senior/open events only.

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**ENTRY LIMITS:** The first 1600 swimmers will be accepted. Entries not accepted will be notified as soon as possible once the meet is filled.

**INDIVIDUAL LIMITS:**

Each swimmer is allowed to enter 4 individual events and 2 relays.

**SEEDING:**

Regular event seeding. **All deck seeding will stop at 8:30 AM** (30 minutes before the start of the meet).

**OFFICIAL RULES:**

Official USS Short Course Rules shall prevail for this meet.

**ELIGIBILITY:**

Age as of Nov. 20, 2004, swimmer must be registered with USS and Wisconsin swimmers must be registered with the Wisconsin LSC of the USS. Non-Wisconsin swimmers must present their USS card.

**AWARDS:**

Ribbons for individual events places 1-16 and relay events places 1-3. Top 3 swimmers per team per event will score team points. Only the top relay per team per event will score team points. **Team trophies will be presented to the top 6 teams.** Team points: (16 places) 20-17-16-15-14-13-12-11-9-7-6-5-4-3-2-1, Relays and the **“Mixed Open 400 IM”** will score double points.

**ADAPTIVE SWIMMERS:**

If you are entering an adaptive swimmer, please make a note on the entry form and have the coach on deck for your team notify meet officials of the swimmer's needs.

**AGE GROUPS:**

6&U, 8&U, 10&U, 11-12, 13-14, Senior. (6&U swimmers will swim with the 8&U swimmers, but will be scored separately. There will be no 6&U relays). The **“Mixed Open 400 IM”** will be scored separately by gender and age group (10&U, 11-12, 13-14, Senior).

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- OFFICIALS:** Janis Nonnan, TBA, TBA (min. 3, 2 stroke/turn)
- FINAL RESULTS:** One copy of meet results will be sent to each team Represented.
- MEET CONDUCT:** It is expected that each club will be responsible for the conduct of their swimmers. If, in the opinion of the Meet Director or Marshall, a swimmer's or spectator's conduct is harmful or disruptive, he/she will be asked to leave.
- ADMISSION:** Admission for persons over 12 will be \$2.00. Heat sheet will be \$3.00, while available.
- FOOD:** A variety of hot and cold food and beverages will be available for Purchase in the school cafeteria. Please, **no carry-ins**.
- ENTRY FEES:** \$3.00 per individual event plus \$2 splash fee per swimmer. \$10.00 Per relay event. Entry fees are not refundable unless the meet is full.
- COACHES:** **Please do not bring seed cards. Seed cards will be at the blocks with the exception of relay events. Relay cards will be in a coach's envelope along with a heat sheet and team roster. Please fill out the relay cards with the swimmers' names and ages. Please have the swimmers present their card to the timers at the block.**

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<b>GIRLS</b>	<b>AM EVENTS</b>	<b>BOYS</b>
1	11 & 12 200 Medley Relay	2
3	13 & 14 200 Medley Relay	4
5	Senior/Open 200 Medley Relay	6
7	11 & 12 50 Free	8
9	13 & 14 50 Free	10
11	Senior/Open 50 Free	12
13	11 & 12 50 Fly	14
15	13 & 14 100 Fly	16
17	Senior/Open 100 Fly	18
19	11 & 12 100 IM	20
21	13 & 14 200 IM	22
23	Senior/Open 200 IM	24
25	11 & 12 50 Breast	26
27	13 & 14 100 Breast	28
29	Senior/Open 100 Breast	30
31	11 & 12 100 Back	32
33	13 & 14 100 Back	34
35	Senior/Open 100 Back	36
37	11 & 12 200 Free Relay	38
39	13 & 14 200 Free Relay	40
41	Senior/Open 200 Free Relay	42
-	-Optional 5 min. Break-	-
43	Mixed Open 400 IM	43

<b>GIRLS</b>	<b>PM EVENTS</b>	<b>BOYS</b>
45	8 and U 100 Medley Relay	46
47	10 and U 200 Medley Relay	48
-	-Optional 5 min. Break-	-
49	8 and U 25 Free	50
51	10 and U 50 Free	52
53	8 and U 25 Fly	54
55	10 and U 50 Fly	56
-	-Optional 5 min. Break-	-
57	8 and U 100 IM	58
59	10 and U 100 IM	60
61	8 and U 50 Breast	62
63	10 and U 50 Breast	64
65	8 and U 25 Back	66
67	10 and U 100 Back	68
-	-Optional 5 min. Break-	-
69	8 and U 100 Free Relay	70
71	10 and U 200 Free Relay	72
-	-Optional 5 min. Break-	-
73	10 and U Mixed 200 IM	73

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**WAIVER**

In consideration of the acceptance of this entry, I/we hereby for myself/ourselves, my/our heirs, administrators, and assigns, waive and release any and all claims against the USS, Ft. Atkinson High School, Ft. Atkinson School District, Ft. Atkinson Swim Team (FAST), FAST board members, and meet officials for injuries and/or expenses incurred by me/us at this meet or while on the road to/from this meet. I/we have entered.

**Signature of the Club Official, Parent or Guardian:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_)\_\_\_\_-\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Contact Person if different than above:** \_\_\_\_\_

**Phone Number:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Team Name and Abbreviation:** \_\_\_\_\_

**Coach's Name:** \_\_\_\_\_

**Coach's E-Mail:** \_\_\_\_\_

**Coach's Phone Number:** (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Name and Address for sending Final Results:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_