#### **GERMANTOWN SWIM CLUB**

# **Holiday Delights**

SANCTION # 2003 - 131 A - BB + B - C

#### **SATURDAY, DECEMBER 6, 2003**

**LOCATION:** U.W.M. – Klotsche Center POOL PHONE: (414) 229-3809

3409 N. Downer Ave. Milwaukee, WI 53211

**FACILITY:** The U.W.M pool is a eight 7'lanes, 25 yards, standard gutters, 30" starting platforms, 6'

at starting end, Colorado timing system, seating for 300.

**MEET TIME LINE:** Warm-ups 8:00 a.m. / Meet Starts at 9:05 a.m. The afternoon session warm-ups will begin

immediately following the morning sessions. The afternoon session will not start before 12:00 noon. Tentative timeline for the meet will be available from the meet director on the

Monday prior to the weekend of the meet.

**WARM-UP** LANES 1-8 will be general swimming only for the first 30 minutes of warm-ups.

**PROCEDURE:** The next 20 minutes lanes 3-4 and 5-6 will be one way sprints only and 1 - 2 - 7 - 8 will

remain as general swimming only. Other lanes may be opened for sprints as needed.

MEET Tim Klunk

**DIRECTOR:** E-mail: MeetDirGSSC@wi.rr.com

**ENTRY:** Individual Events: \$3.00 / entry; Relay Events: \$8.00 / entry

**FEES** There is also a Wisconsin Swimming Association Splash Fee of \$1.25 per

participating swimmer in the meet. All outstanding fees must accompany entries. Please make all checks payable to: *Germantown Swim Club*. Team entry will not

be accepted without the required entry / waiver forms and entry fees.

**ADMISSIONS:** Spectators (18 years & older) will be charged an admission fee of \$3.00 on Saturday.

Heat sheets will be available at a fee of \$3.00.

**MEET FORMAT:** All events will be pre-seeded. All Relay events will be pre-seeded, with the swimmers

reporting to the respective lane, heat and starting ends that they are seeded within. Coaches will have all relay cards within their team packets. Name and I.D. number, order of swimmers and ages must be on the back of all relay cards. All 8 and Under 25 yard events will be watch timed. BB-B time standards for this meet apply to 14 &Under events. SENIOR events follow USS rule 203.2 Eligibility - All registered swimmers are

eligible for the senior class.

NOTE: ALL WISCONSIN USS RULES ARE IN EFFECT,

• Effective December 1, 2000, the "No Recall start became official.

- <u>Current USS and Wisconsin Swimming Rules shall govern the</u> conduct of this meet.
- If there are any Special Needs Swimmers see Management before/ at meet.
- All swimmers, coaches and officials must be registered USS members.

There is **NO SMOKING ALLOWED** within the buildings or on the

grounds of University of Wisconsin, Milwaukee per city and county laws.

**AWARDS:** All Relays: Ribbons  $1^{st} - 8^{th}$  Place

Individual Events: Medals 1<sup>st</sup> –3<sup>rd</sup> Place

Ribbons  $4^{th} - 16^{th}$  Place

BB Achievers: Medals

**ENTRIES:** All entry forms and fees are due no later than **November 20th, 2003**. Entries are limited

to 1,600 swims per day as stipulated by the Wisconsin Swimming Association Inc. meet reservation policies. Swimmers are limited to (4) individual swims and (2) relay swims on. Age of swimmer is to be determined as of December 6th, 2003. DECK ENTRIES WILL BE ACCEPTED AT THE DISCRETION OF THE MEET DIRECTOR. No athlete registrations will be done at the meet unless already entered with the original team entries. This meet is ran through the Hy-Tek system within its latest updated program.

Designated team disks may be used for initial and final results.

Please send a hard copy with your floppy discs for positive verification of entries.

Mail entries to the following address:

GERMANTOWN SWIM CLUB Attention: Tim Klunk P.O. Box 274 Germantown, WI 53022

**FINAL RESULTS:** One copy of the final results will be mailed to each participating team. Additional

copies can be ordered at the awards table at a cost of \$5.00 per copy. Final results will also be available 1 week after the meet at the Wisconsin Swimming Inc. web site:

http://www.WISCONSINSWIMMING.ORG

**CONCESSIONS:** A snack bar will be available on Saturday in the hallway adjacent to the pool. Please no

food within the competition area.

**CONDUCT:** Each team is responsible for the conduct of their own swimmers. Any destruction

of school property will not be tolerated. Misconduct or damages may result in the expulsion from the meet and an assessment of damages billed to the respective

parties.

LOST & FOUND: Located at the awards table throughout the course of the meet or after the meet

by calling 262-502-7100.

**FIRST AID:** Any person requiring first aid should report to the **Announcers table**.

**OFFICIALS:** Starters: Quentin Stedman, Dennis Hoffman

Stroke/Turn: Cindy Thompson, Cheryl Perdzock

# **GERMANTOWN HOLIDAY DELIGHTS**

# **ORDER OF EVENTS**

### **SATURDAY A.M.**

#### **WARM-UPS (8:00 A.M.)**

#### MEET STARTS (9:05 A.M.)

<u>GIRLS</u>				<b>BOYS</b>
1	8 & Under	25	FLY	2
3	10 & Under	50	FLY	4
5	8 & Under	100	FREE RELAY	6
7	10 & Under	200	FREE RELAY	8
9	8 & Under	25	BACK	10
11	10 & Under	50	BACK	12
13	8 & Under	25	BREAST	14
15	10 & Under	50	BREAST	16
17	8 & Under	25	FREESTYLE	18
19	10 & Under	200	FREESTYLE	20

### SATURDAY P.M.

<u>GIRLS</u>				<b>BOYS</b>
21	11 - 12	100	FLY	22
23	SENIOR	100	FLY	24
25	11 - 12	200	FREE RELAY	26
27	SENIOR	200	FREE RELAY	28
29	11 - 12	200	BACK	30
31	SENIOR	200	BACK	32
33	11 - 12	50	BREAST	34
35	SENIOR	100	BREAST	36
37	11 - 12	500	FREE	38
39	SENIOR	500	FREE	40

### WAIVER AND ENTRY FORM

In consideration of the acceptance of this entry form, I/we hereby, for myself/ourselves, my/theirs, administrators assigns, waive and release any and all claims against United States Swimming (USS), Wisconsin Swimming Inc., the Germantown Swim Club Inc. (GSSC), U.W. Milwaukee and their staffs for injuries incurred by me/us at the meet or while traveling to and from the meet. I/we are bona-fide eligible USS swimmers and eligible to compete in all events I/we have entered.

CLUB NAME:		CLUB ALPHA CODE:						
Signature of club official, par-	ent/guardian, coach:							
Mailing address for final resu	lts;							
Name:								
Address:								
City:	Zip: _				_			
Name of registered Coaches r	epresenting your tear	n at the	meet:					
Name:		Pho	ne:					
Name:		Pho	ne:					
Name:		Pho	ne:					
Name and phone number of p	erson to contact rega	rding th	is entry	forn	n:			
Name:		Phor	ne:					
ENTRY RECAP:								
Number of total Individual Ev	/ents:	X	\$3.00	ea.	=	\$		
Number of Relay Entries:		X	\$8.00	ea.	=	\$		
Number of Individual Swimm	ners entered	X	\$1.25	ea.	=	\$		
Less Reservation Moneys					-	\$		
Total Entry Fee: Ch	eck #:					\$		
Make checks payable to: <b>GE</b>	ERMANTOWN SWI	M CLU	В			es Due By: vember 201	th, 2003	