

# Lake Country "Phoenix" Swim Team

## Fall Single Age High Point Trophy Challenge

Sanction #2004-115WI

- DATE:** Sunday, October 10th, 2004
- PLACE:** HARTFORD HIGH SCHOOL 805 Cedar Street, Hartford, Wisconsin
- WARMUP:** AM session: 8:00-9:00 AM as follows: 8:00-8:30 circle swim all lanes NO diving.  
8:30-9:00 one way sprints with dive lanes 3&4, push 50's 2&5, circle lanes 1&6. Meet starts at 9:05 AM.  
Failure to follow warm-up guidelines may result in disqualification from the next individual event.  
PM Session: Warm-ups 45 minutes. Meet starts 50 minutes after conclusion of AM session.
- POOL:** Six lane, 25 yard pool, 8'6" starting depth, 30" blocks, non-turbulent lane markers and backstroke flags.
- TIMING:** Colorado System with back-up watches and across the board judging in case of a malfunction. All events are timed finals.
- OFFICIAL RULES:** Official 2004 Short Course USA Rules shall prevail for this meet. Swimmers must be registered USS swimmers. Age as of October 10, 2004. Please notify meet officials of any adaptive swimmers upon arriving at the meet.
- OFFICIALS:** To be announced.
- ENTRY CHAIR:** Darsi Kohnhorst E-Mail: [lakecountryswim@sbcglobal.net](mailto:lakecountryswim@sbcglobal.net)
- MEET DIRECTOR:** Rob Prost  
PO Box 181 Fax: (262) 367-1870  
Hartland, WI 53029  
(262) 367-7657
- ENTRY DEADLINES:** Completed entry form, waiver and fees must be received no later than Friday October 1, 2004 by the entry chair. No phone entries will be taken. This meet is being run with Hy-Tek swim software. Any teams wishing to submit their entries via disk or e-mail are encouraged to do so. No commlinked disks will be given to teams who do not enter their team by disk. No seed times will be changed once completed form or disk has been received by entry chair. Please note any special requirements for adaptive swimmers on the entry form.
- ENTRY LIMIT:** Swimmers may compete in four (4) individual events plus one relays.
- FEES:** Individual events \$3.00 per event and \$10.00 per relay. \$2.00 LSC surcharge per swimmer swimming in at least one individual event. Deck entries shall be \$6.00/individual event and \$16.00/relay entry. A processing fee of \$2.00 per swimmer, up to a team maximum of \$50, will be charged for swimmers or teams entering their entries not via a Hy-tek file. Please make checks payable to LAKE COUNTRY SWIM TEAM. Entry fees must accompany the official entry forms and are not refundable.
- SCRATCHES:** There will be no scratch meeting. Swimmers wishing to scratch merely fail to report to the blocks.
- ADMISSIONS:** Spectators over 13 years old are \$3.00. Heat sheets will be \$2.00.
- PARKING:** Parking is available in the west lot.
- FINAL RESULTS:** One copy of meet results will be sent to each team represented. All others wishing results can order them at the admissions table for \$10.00 per copy. All coaches needing a disk of final results may pick them up in the computer room following the meet.
- CONDUCT:** Each team is responsible for the conduct of its swimmers.
- AWARDS:** Senior Events: No Individual or Relay Awards  
13&Under Individual Events: Ribbons 1<sup>st</sup> through 12<sup>th</sup>  
Relay Events: Ribbons 1<sup>st</sup> through 6<sup>th</sup>  
High Point Awards: 1<sup>st</sup> through 12<sup>th</sup> in each age group including Seniors  
High Point awards will be presented to the individual winners at the conclusion of each session.  
All individual and relay ribbons will be available during the meet. No awards will be mailed.
- SCORING:** 12-place scoring will be used: 16-13-12-11-10-9-7-5-4-3-2-1
- FOOD:** A superb selection of hot and cold food and beverages will be available in the cafeteria.

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## Girls Event #      Event Description      Boys Event #

AM Session: Warm-ups 8:00 am      Meet Begins 9:05 am

1	Senior 200 Free Relay	2
3	11&12 200 Free Relay	4
5	Senior 100 Butterfly	6
7	13 100 Butterfly	8
9	12 50 Butterfly	10
11	11 50 Butterfly	12
13	Senior 400 IM	14
15	13 400 IM	16
17	12 400 IM	18
19	11 400 IM	20
21	Senior 100 Backstroke	22
23	13 100 Backstroke	24
25	12 100 Backstroke	26
27	11 100 Backstroke	28
29	Senior 100 Breaststroke	30
31	13 100 Breaststroke	32
33	12 50 Breaststroke	34
35	11 50 Breaststroke	36
37	Senior 100 Freestyle	38
39	13 100 Freestyle	40
41	12 100 Freestyle	42
43	11 100 Freestyle	44

**PM Session: Warm-ups 45 minutes. Meet starts 50 minutes after conclusion of AM session.**

45	10&Un. 200 Free Relay	46
47	10 50 Butterfly	48
49	9 50 Butterfly	50
51	8 25 Butterfly	52
53	7&Un. 25 Butterfly	54
55	10 200 IM	56
57	9 200 IM	58
59	8 100 IM	60
61	7&Un. 100 IM	62
63	10 50 Backstroke	64
65	9 50 Backstroke	66
67	8 25 Backstroke	68
69	7&Un. 25 Backstroke	70
71	10 50 Breaststroke	72
73	9 50 Breaststroke	74
75	8 25 Breaststroke	76
77	7&Un. 25 Breaststroke	78
79	10 50 Freestyle	80
81	9 50 Freestyle	82
83	8 25 Freestyle	84
85	7&Un. 25 Freestyle	86

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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 United States Swimming, the Wisconsin Local Swimming Committee of the United States Swimming, the Lake Country Swim Team, the Hartford High School, and their staffs for the injuries and or expenses accrued by Me/Us at the meet, or while on the road to and from the meet. I/We are bona-fide amateur athletes currently registered with United States Swimming and in good standing with Wisconsin Swimming, Inc. and eligible to compete in all events I/We have entered. I/We also understand that our club will be responsible financially for any damage done to the facility by our athletes during the meet. I/We will be responsible for making our athletes/parents/coaches/club administrators aware of the waiver requirements in participation in this event.

Club Name: \_\_\_\_\_ Initials \_\_\_\_\_  
(Four Only)

### Signature of Club Official, Parent or Guardian

Name: \_\_\_\_\_ Day Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_ Evening Phone Number \_\_\_\_\_

City, State, Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

In the case of facility problem, weather or other unforeseen circumstance which would require cancellation or delay of meet who may we contact as soon as possible for participant notification.

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name of coach or team representative(s) at meet:** \_\_\_\_\_ AM / PM  
(Must have current Coach's credentials to be on deck)

\_\_\_\_\_ AM / PM

**Entry Fee Recap:** \_\_\_\_\_ Individual Events x \$3.00 = \$ \_\_\_\_\_

\_\_\_\_\_ Less Reservation Check = -\$ \_\_\_\_\_

(Only to be used for Ind. Events! May not be used for relays or surcharges)

**A: Entry Fee Total** = \$ \_\_\_\_\_

\_\_\_\_\_ Relay Teams x \$10.00 = \$ \_\_\_\_\_

\_\_\_\_\_ LSC Surcharge x \$2.00 = \$ \_\_\_\_\_

(# of swimmers in Individual Events only)

**B: Relay & Surcharge Total** = \$ \_\_\_\_\_

\_\_\_\_\_ Manual Entry Surcharge x \$2.00 = \$ \_\_\_\_\_

(# of swimmers entered. Maximum \$50)

**C: Manual Entry Total** = \$ \_\_\_\_\_

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**Total of Lines A,B & C = \$ \_\_\_\_\_**

Make checks payable to: **Lake Country Swim Team** Check # \_\_\_\_\_

Mail Entries to: Lake Country Swim Team  
Darsi Kohnhorst  
PO Box 181  
Hartland, Wisconsin 53029

Questions: Lake Country Team Office (262) 367-7657