### Lake Country "Phoenix" Swim Team

Fall Single Age High Point Trophy Challenge Sanction #2005-105WI

**DATE:** Saturday, October 8th, 2005

PLACE: HARTFORD HIGH SCHOOL 805 Cedar Street, Hartford, Wisconsin

**WARMUP:** AM session: 7:30-8:30 AM as follows: 7:30-8:00 circle swim all lanes NO diving.

8:00-8:30 one way sprints and push 50's as needed. Meet starts at 8:35 AM. 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 Official 2005 Short Course USA Rules shall prevail for this meet. Swimmers must be registered USS

**RULES**: swimmers. Age as of October 8, 2005. Please notify meet officials of any adaptive swimmers upon

arriving at the meet.

**OFFICIALS**: To be announced.

ENTRY CHAIR: Darsi Kohnhorst E-Mail: <u>lakecountryswim@sbcglobal.net</u>

MEET Rob Prost DIRECTOR: PO Box 181

Hartland, WI 53029 (262) 367-7657

**ENTRY** Completed entry file, waiver and fees must be r3eceived no later than Friday September 30, 2005 by the

**DEADLINES:** 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 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. Please make checks payable to LAKE COUNTRY SWIM TEAM. Entry fees must accompany the official entry

forms and are not refundable.

**ADMISSIONS:** Spectators over 13 years old are \$3.00. Heat sheets will be \$2.00.

**PARKING:** Parking is available in the west lot.

**FINAL** One copy of meet results will be sent to each team represented. All others wishing results can order

**RESULTS:** 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. Results will be emailed to teams providing an email

address.

**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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Fall Single Age High Point Trophy Challenge October 8, 2005

Girls Event #	<b>Event Descri</b>	<u>ption</u>	Boys Event #
AM Session: \	Narm-ups 7:30 am	Meet E	Begins 8:35 am

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

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

43	10&Un. 200 Free Relay	44
45	10 50 Butterfly	46
47	9 50 Butterfly	48
49	8 25 Butterfly	<del>-</del> 50
	•	
51	7&Un. 25 Butterfly	52
53	10 100 IM	54
55	9 100 IM	56
57	8 100 IM	58
59	7&Un. 100 IM	60
61	10 50 Backstroke	62
63	9 50 Backstroke	64
65	8 25 Backstroke	66
67	7&Un. 25 Backstroke	68
69	10 100 Breaststroke	70
71	9 100 Breaststroke	72
73	8 25 Breaststroke	74
75	7&Un. 25 Breaststroke	76
77	10 50 Freestyle	78
79	9 50 Freestyle	80
81	8 25 Freestyle	82
83	7&Un. 25 Freestyle	84

# Lake Country Swim Team Fall Single Age High Point Trophy Challenge

Entry Form	ntry Form Team Name:		<del></del>	USA Code	
Please Circle: Girls Boys	s <b>Ent</b> r	y Contact: _			Phone#:_
Name/ USA# (Required of all swimmers!)	Age	# / Event/ Seed Time			

Event Number-Description	Α	В	С	D
#1 Girls Senior 200 Free Relay				
#43 Girls 10-Un. 200 Free Relay				
#2 Boys Senior 100 Free Relay				
#44 Boys 10-Un. 100 Free Relay				

#### 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:			
Signature of Club Of	ficial, Parent or Guardian	(Four Only)	
Name:		Day Phone Number:	<del></del>
Title:	itle: Evening Phone Number		
City, State, Zip		E-Mail	
	blem, weather or other unforeseen circlible for participant notification.	umstance which would require cancellation o	or delay of meet who may we
<b>Emergency Contact:</b>		Phone:	
Name of coach or te (Must have current Co	am representative(s) at meet: pach's credentials to be on deck)		
Entry Fee Recap:	Individual Events x		
	Less Reservation C (Only to be used for Ind. Events!	check = -\$ May not be used for relays or surcharge	es)
	A: Entry Fee	e Total = \$	
	Relay Teams x \$10	.00 = \$	
	LSC Surcharge x \$3 (# of swimmers in Individual Eve	2.00 = \$ nts only)	
	·	Surcharge Total = \$	
		ines A & B = \$	
Make checks payable	to: Lake Country Swim Team	Check #	
	Kohnhorst ox 181		

Email Entries to: lakecountryswim@sbcglobal.net

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

Hartland, Wisconsin 53029