

# MENOMONEE FALLS FALL FEST

## A-BB-B+C

Sunday October 17, 2004

SANCTION NUMBER 2004-116WI

LOCATION Menomonee Falls High School  
W142 N8101 Merrimac Drive  
Menomonee Falls, WI 53051

FACILITY 25 yard pool with 6 lanes, non-turbulence lane markers and backstroke flags.  
Pool depth 3'6" to 5'. 30" slanted starting blocks into 5' pool depth  
and Colorado automatic timing system.

SCHEDULE Warm-ups: 7:30 a.m. Meet Starts: 9:05 a.m.

SPONSOR/  
FACILITY Menomonee Falls Swim Club  
SUPPORT Menomonee Falls Recreation Department

ENTRIES The completed entry forms, signed waiver and fees must be received by Wednesday, Oct. 6, 2004.

MEET Lisa Mickola  
DIRECTOR W147 N6911 Woodland Dr.  
Menomonee Falls, WI 53051  
(262) 250-9711  
Mickola@wi.rr.com

OFFICIALS Ted Hanson, TBA

EVENT Four (4) individual events plus relays  
LIMITS

AGE & CLASS Swimmer's age as of October 17, 2004 shall determine age group eligibility. A-BB-B+C  
DIVISION classification will be used for 10&U and 11-12 swimmers. The 8&U and Senior  
swimmers will be A-B-C combined. ALL classes will swim together according to age group  
and sex. All relays events will be A-B-C combined. 2004 National Motivational Time  
Standards will be used.

ENTRY FEES \$2.00 per swimmer splash fee  
\$3.00 per individual entry  
\$8.00 per relay entry

SEED TIMES Submit all seed times in yard cutoff times using registration forms provided. Please  
use separate forms for boys and girls. Be sure to indicate any UNATTACHED  
swimmers. **Hytek disk entries will be accepted and are preferred.** Please include Hytek  
swimmer listings. When filling out relay cards at the meet, names and ages of the swimmers  
must be on the back.

OUT OF STATE All out of state swimmers must have a current (paid) USA Swimming card with them.  
SWIMMERS

ADAPTIVE Please notify meet officials of any adaptive swimmers upon arriving at meet.  
SWIMMERS

TIMING Events will be timed and judged by Colorado automatic timing system and judging

equipment. Colorado horn starting system. Two back-up timers per lane will be provided.

OFFICIAL 2004 USA Swimming rules for competitive swimming shall be used. All entry forms must include swimmers' current USA Swimming registration numbers. All clubs must be registered with USA Swimming and must show their alpha code on the entry form.

This is a PRE-SEEDED meet. Swimmers should report to their starting blocks for their scheduled event and heat. The Senior 1000 freestyle event will be DECK-SEEDED and run fastest to slowest. Positive check-in is required for this event. The check-in sheet will be posted on the outside glass of the office. Check-in will close at 10:00 am.

Deck Registration will be accepted. Parents should come to the pool office to complete the forms. To deck register, the swimmer shall pay the annual USA Swimming registration fee of \$43.00 plus a \$15.00 surcharge.

Deck Seeding will be allowed into unfilled lanes of existing heats only and at the discretion of the Meet Manager. There will be an additional \$2.00 surcharge per swimmer for deck seeding.

WARM-UPS All swimmers must enter the pool FEET FIRST - No Exceptions.

7:30 a.m. to 8:15 a.m. - Circle swim only in all lanes

8:15 a.m. to 9:00 a.m. - Lanes 3 & 4 - ONE WAY SPRINTS w/STARTS

Lanes 1,2, & 5,6 - continue as circle swim only

The diving well will only be open for 8 & under warm-ups and the 1000 Freestyle cool-down.

AWARDS Individuals: Custom: 1st - 3rd Place  
Ribbons: 4th - 6th Place  
Relays: Ribbons: 1st - 6th Place  
Achievers: Custom - for those "C" swimmers achieving "B", "BB" or "A" times  
Heat Ribbons: Ribbons will be awarded for the 8&U and 10&U events only

ADMISSION Spectators over 18: \$3.00  
Heat Sheet: \$2.00

RESULTS Meets Results \$5.00 each copy. Orders can be placed in the pool office.

FOOD Available outside the Pool area  
**No** food or coolers will be allowed in pool area.

LOST&FOUND Located in the pool office. After the meet, please contact the meet director. Lost & found will only be held for two weeks after the meet. Any remaining items will then be donated to charity.

FIRST AID A First Aid kit will be available in the pool office.

REST AREA The rest area will be restricted to the pool and the hallways adjacent to the pool. Swimmers will not be allowed in other areas of the school.

SMOKING Per USA Swimming rules, smoking is NOT permitted in areas designated for swimmers, including the rest areas and pool.

Menomonee Falls High School is a SMOKE and DRUG FREE ZONE.

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Girls Event #	Age	Description	Boys Event #
1	10&U	200 yd Medley Relay	2
3	Senior*	200 yd Medley Relay	4
5	8&U	25 yd Freestyle	6
7	10&U	50 yd Freestyle	8
9	11-12	100 yd Freestyle	10
11	Senior	100 yd Freestyle	12
13	8&U	25 yd Breaststroke	14
15	10&U	100 yd Breaststroke	16
17	11-12	100 yd Breaststroke	18
19	Senior	100 yd Breaststroke	20
21	10&U	100 yd IM	22
23	11-12	100 yd IM	24
25	Senior	200 yd IM	26
27	8&U	25 yd Butterfly	28
29	10&U	50 yd Butterfly	30
31	11-12	100 yd Butterfly	32
33	Senior	100 yd Butterfly	34
35	8&U	25 yd Backstroke	36
37	10&U	100 yd Backstroke	38
39	11-12	200 yd Backstroke	40
41	Senior	200 yd Backstroke	42
43	10&U	200 yd Freestyle Relay	44
45	Senior*	200 yd Freestyle Relay	46
** 15 minute break **			
47	Mixed Senior	1000 yd Freestyle	

\*Senior Relays open to any age

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INDIVIDUAL EVENT ENTRY FORM

Team Name: \_\_\_\_\_

**Please enter in age order.**

**Use separate sheets for Girls & Boys.**

Name / USS # / Age
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	Event #							
	Distance/Stroke							
	Seed Time							

	Event #							
	Distance/Stroke							
	Seed Time							

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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 United States Swimming (USS), the Wisconsin Local Swimming Committee of the USS, Menomonee Falls Swim Club, Menomonee Falls High School, their Board of Directors and all other staff for injuries and/or expenses incurred by me/us at the meet or while on the road to and from the meet. I/We are bonafide amateur athletes and eligible to compete in all events I/we have entered. I/We also understand that my/our club will be responsible financially for any damage done to the facility by my/our athletes during the meet. I/We will be responsible for making my/our athletes/parents/coaches/club administrators aware of the waiver requirements of participation in this event.

Team Name: \_\_\_\_\_ Abbreviation: \_\_\_\_\_

Signature of Club Official Parent or Guardian Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

\_\_\_\_\_

Coach or Team Representative at Meet Name: \_\_\_\_\_

Person to Contact in Case of Name: \_\_\_\_\_

Entry Problems

Phone: \_\_\_\_\_

Name and Address for Mailing Name: \_\_\_\_\_

Final Results

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

\_\_\_\_\_

Entry Fee Summary: \_\_\_\_\_ Individual Events x \$3.00 =\$ \_\_\_\_\_

Amount Sent with Reservation \$ \_\_\_\_\_ (Subtract)

Balance Due for Additional Swims \$ \_\_\_\_\_ (Enter zero if less)

Excess reservation may not be applied toward relay and splash fees.

\_\_\_\_\_ Relay Teams x \$8.00 = \$ \_\_\_\_\_

\_\_\_\_\_ Swimmers x \$2.00 = \$ \_\_\_\_\_ Splash Fee

Entry Fee Due \$ \_\_\_\_\_

Make checks payable to: **Menomonee Falls Swim Club** Check # \_\_\_\_\_

Mail Entries to: Lisa Mickola  
W147 N6911 Woodland Dr.  
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(262) 250-9711  
Mickola@wi.rr.com

Entries must be received by Wednesday, October 6, 2004.