OZAUKEE AQUATICS SPRING CLASSIC Age Group 12 & Under May 22, 2004 Sanction # 2004 - 050

LOCATION: HOST:	Cedarburg High School 5000 Evergreen Lane Cedarburg, WI 53012 Ozaukee Aquatics Swim Team (OZ)					
FACILITY:	The Cedarburg High School Pool is a 25 yard, 8 lane pool with antiturbulant lane lines and backstroke flags; pool depth is 13 at the blocks Daktronic timing system with semiautomatic button on each lane, and manual back up watches, 22" blocks at the start. All 25 yard swims will start off the end that is at a 5' pool depth.					
MEET DIRECTORS:	Don Steinbergemail: donsteinberg@ameritech.net1085 Horns Corners(262) 375-4486					
	Amy Petersenemail: donzictp@aol.com310 Riverview Dr.(262) 424-0783					
WARM-UPS:	Saturday morning warm-ups 7:00 – 8:00 pm Meet starts at 8:05 pm General warm-up 7:00 - 8:00 am as follows: 7 - 7:30 am circle swim all lanes. FEET FIRST ENTRY ONLY, NO DIVING ALLOWED with the exception of sprints, 7:30 - 8:00 am one way sprints with diving in lanes 3,4 & 5. Push 50's lane 2, 6 & 7. Circle swim, lanes 1 & 8. The meet will begin at 8:05 am.					
	A tentative timeline for the meet will be available on the Tuesday prior to the meet from the meet director. Please include your email address on the waiver to expedite this information.					
FORMAT:	All events will be preseeded. Swimmers are to report directly to the blocks as assigned in the heat sheet. All swimmers 8 & under will be staged . Please have all your swimmers report when called to this area. OZ will assist these swimmers with their lane assignments. Swimmers must provide their own person to count laps for distance events.					
RULES:	Official 2004 Short Course USA rules prevail for this meet. Swimmers must be registered Wisconsin USA swimmers. Out of state swimmers must be prepared to show their USS card. Age is as of May 22, 2004. The no-call back rule will be effect for all false starts.					
ENTRIES:	Swimmers may compete in 4 individual events per day; plus relays for the meet. Completed individual and relay entry forms, waiver and fees must be received no later than <u>Tuesday, May. 18, 2004</u> . This meet will be run using the Hy-Tek Meet Manager software. If you are using TEAM MANAGER, please submit entries via Hy-Tek commlink. Please include hard copy with all disk entries. All teams submitting Hy-Tek disks will receive a copy of final results on disk as well as hard copy. Entry fees are non refundable.					
ENTRY FEES:	Individual events: \$3.00 Relays \$8.00 Splash fee \$2.00 per swimmer Please make checks payable to: Ozaukee Aquatics					
ENTRY CHAIRMAN:	Mail all entries to:Judy MerryfieldN104 W6262 Susan LnCedarburg, WI 53012(262) 376-9586					

DECK ENTRIES:	Deck entries will be taken on a first come, first serve basis for open lanes only. Events will not be reseeded. Individual deck entries - \$5.00 Relay deck entries \$10.00.						
DECK REGISTRATION:	Deck registration will be allowed if accompanied by a check for \$65 payable to WI Swimming						
AWARDS:	Individual: 1 - 16 Ribbons (scoring) Relays: 1 - 8 Ribbons 9-12 Ribbons for all 10 & unders (non-scoring individual places) Heat winners - all events						
SCORING:	Individual Events: 8-7-6-5-4-3-2-1						
ADMISSIONS:	Adult spectators \$2.00 for the day - Heat Sheets \$2.00 for the day						
SCRATCHES:	Wisconsin scratch rule will be in effect.						
FINAL RESULTS:	One copy of meet results will be sent to each team. Additional copies can be ordered at the admissions table for \$8						
COACHES	Coaches must present a current coaching card before receiving meet packet. Packets will be available in the pool office on the deck. There will be a brief coach's meeting the pool office during the AM warm-ups.						
CONDUCT:	Each team is responsible for the conduct of it's swimmers.						
CONCESSIONS:	A variety of delicious food will be available during the meet.						
LOST & FOUND:	Will be located behind the scoring table on the pool deck.						
FIRST AID:	Will be available in the pool office.						
ADAPTIVE SWIMMER:	The coach is responsible to inform the meet referee on the day of the meet of any swimmer's special needs.						
OFFICIALS:	TBA						

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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 (USA), Wisconsin Swimming Inc., Homestead High School and the Ozaukee Aquatics Swim Team 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 USA swimmers and eligible to compete in all events I/we have entered.

CLUB NAME:	CLUB ALPHA CODE:				
Signature of club official, parent/guardian, coach:					
Mailing address for final results:					
Name:					
Address:					
City: State:	Zip:				
Name of registered Coaches representing your team at the me	eet:				
Name: email:					
Name: email: _					
Name and phone number of person to contact regarding this e	entry form:				
Name:	phone:				
Email Address	-				
ENTRY RECAP:					
Number of total Individual Events: X	\$3.00 ea. = \$				
Number of Relay Entries: X	\$8.00 ea. = \$				
Number of Individual Swimmers X	\$2.00 ea = \$				
Less Reservation Monies	- \$				
Total Entry Fee: Check #	\$				
Checks payable to: Ozaukee Aquatics Entrie Mail to: Judy Merryfield email: judymerryfield@h	ies due by Tuesday, May. 18, 2004 notmail.com				

(262) 375-9586

N104 W6262 Susan Lane Cedarburg, WI 53012

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ORDER OF EVENTS

SATURDAY, MAY 22, 2004

GIRLS	Warmups 7:00 am Meet starts 8:05 am	BOYS
01	11& 12 200 Medley Relay	02
03	10 & Under 200 Medley Relay	04
05	8 & Under 100 Medley Relay	06
07	11 – 12 200 Freestyle	08
09	10 & Under 100 Freestyle	10
11	8 & Under 50 Free	12
13	11-12 200 Back	14
15	10 & Under 100 Back	16
17	8 yr 25 Back	18
19	11-12 400 IM	20
21	10 & Under 200 IM	22
23	8 & Under 100 IM	24
25	11-12 100 Breast	26
27	10 & Under 50 Breast	28
29	8 & Under 25 Breast	30
31	11-12 100 Fly	32
33	10 & Under 50 Fly	34
35	8 & Under 25 Fly	36
37	11-12 200 Free Relay	38
39	10 & Under 200 Free Relay	40
41	8 & Under 100 Free Relay	42

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Individual Entry Form

 Team Name:
 Club Code:

Entry Contact:_____Phone #:_____

Name	ID	Age	Event #/ Time						

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Relay Entry Form
 Team Name:
 Club Code:
 Entry Contact:_____Phone #:_____ B Relay Names & C Relay Names & D Relay Names & Event # & Description A Relay Names & Time Time Time Time