

WRAT Heat Wave Open  
Saturday, June 24th, 2006  
WI Sanction #2006-073WI

- DATE: Saturday, June 24, 2006
- LOCATION: Waunakee High School Pool  
100 School Drive  
Waunakee, WI 53597
- FACILITY: Eight 7 foot lanes, 25 yards, standard 12" deck level gutter system, pool depth of 3 feet 6 inches at the shallow end; nonturbulent Wave Eater II lane markers, backstroke flags, and 18 inch above surface starting platforms at the deep end. Pool depth of 7'0" at the deep (starting) end.
- SCHEDULE: AM Session: 7:30-8:30 AM Warm-ups  
8:45 AM Meet Starts  
PM Session: Warm-ups for PM session will last 60 minutes and will not begin before 11:00 AM. Afternoon session will begin 70 minutes after the morning session but not before 12:15 PM
- WARM UPS: The first half hour of each warm up session will be circle swim only in all lanes. The last half hour lanes 3, 4, and 5 will be for one way sprints, diving from the block permitted.
- A coach from your team must be on deck during warm-ups. Swimmers not following procedures could be disqualified at the discretion of meet officials.
- ENTRIES: Only entries from teams invited to the meet will be accepted. Swimmers may compete in four (4) individual events per day plus two (2) relays. Entries will be accepted up to a maximum of 1200 entries for the meet. This meet will be run using Hy-Tek meet manager. All teams are encouraged to submit entries on a disk in the Hy-Tek commlink format. A hard copy of entries must accompany a disk.
- ENTRY DEADLINE: The entry chair must receive a completed entry form and signed waiver no later than **Friday, June 9th**. No entries will be taken over the phone. Meet waiver must be sent via standard mail and postmarked by the entry deadline.
- ENTRY CHAIR: David Stamsta  
126 Winston Way  
Waunakee, WI 53597  
(608) 850-5751  
Cell: (608) 213-3300  
[davstamsta@aol.com](mailto:davstamsta@aol.com)
- MEET DIRECTOR: Kevin Schlittler  
1030 Ganser Drive  
Waunakee, WI 53597  
(608) 850-3727  
[Kevin\\_Schlittler@hotmail.com](mailto:Kevin_Schlittler@hotmail.com)

**ENTRY FEES:** \$3.00 per individual event plus \$2.00 splash fee per swimmer.  
\$10.00 per relay event. Entry fees are not refundable unless the meet is full.

**ADMISSION:** Admission will be \$2.00, heat sheets may be purchased for \$3.00. Coaches' packets will be available at the admission table. Coaches and Club Officials desiring to be on deck will be required to display proof of current USAS membership at all times.

**TIMING SYSTEM:** Colorado System 5 electronic timing system with strobe/horn start touch pads and manual backup timing buttons. Each lane will have 2 timers with electronic stopwatches. All events will be timed finals.

**OFFICIAL RULES:** Official 2006 Short Course USA Swimming Rules shall prevail for this meet. Swimmers must be registered WISCONSIN USA Swimming swimmers. Swimmers' age is as of June 24, 2006. No Recall Starts.

**MEET CONDUCT:** It is expected that each club will be responsible for the conduct of their swimmers. If in the opinion of the Meet Director/Marshall a swimmer's or spectators conduct is harmful or disruptive he/she will be asked to leave the pool area.

**ADAPTIVE SWIMMERS:** Please indicate on the entries form any special needs for those athletes requiring assistance. Also, please inform the head official of those needs prior to the start of the meet.

**AGE GROUPS:** 8&Under, 10&Under, 11-12, 13&Over/Open.

**AWARDS:** Medals will be awarded to the 1<sup>st</sup>-3<sup>rd</sup> place winners in each individual event; ribbons will be awarded to the 4<sup>th</sup>-12<sup>th</sup> place winners in each individual event. Ribbons will be awarded for each relay team member of the 1<sup>st</sup> through 3<sup>rd</sup> place winners in each relay event.

**OFFICIALS:**

AM:	Stroke/Turn	TBD
	Starter/Referee	TBD
PM:	Stroke/Turn	TBD
	Starter/Referee	TBD

**MEET CONDUCT:** Each club is responsible for the conduct of its swimmers. Any person who, in the opinion of the Meet Director or Meet Marshall, is harmful to others or to other's property will be required to leave the competition.

**FINAL RESULTS:** One copy of the meet's final results will be sent to each team's designated recipient.

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**AM Session**

<b>GIRLS</b>		<b>BOYS</b>
1	8&U 100 Medley Relay	2
3	10&U 200 Medley Relay	4
5	8&U 25 Freestyle	6
7	10&U 50 Freestyle	8
9	8&U 25 Butterfly	10
11	10&U 50 Butterfly	12
13	8&U 25 Backstroke	14
15	10&U 50 Backstroke	16
17	8&U 25 Breaststroke	18
19	10&U 50 Breaststroke	20
21	8&U 100 IM	22
23	10&U 100 IM	24
25	8&U 50 Butterfly	26
27	10&Under 100 Butterfly	28
29	8&U 100 Freestyle Relay	30
31	10&U 200 Freestyle Relay	32

**PM Session**

<b>GIRLS</b>		<b>BOYS</b>
33	Open 200 Backstroke	34
	* optional 5 minute break *	
35	11-12 200 Medley Relay	36
37	13&Over/Open 200 Medley Relay	38
39	11-12 50 Freestyle	40
41	13&Over/Open 50 Freestyle	42
43	11-12 200 Butterfly	44
45	13&Over/Open 200 Butterfly	46
47	11-12 50 Backstroke	48
49	13&Over/Open 100 Backstroke	50
51	11-12 50 Breaststroke	52
53	13&Over/Open 100 Breaststroke	54
55	11-12 100 IM	56
57	13&Over/Open 200 IM	58
59	11-12 50 Butterfly	60
61	13&Over/Open 100 Butterfly	62
63	11-12 100 Freestyle	64
65	11-12 200 Freestyle Relay	66
67	13&Over/Open 200 Freestyle Relay	68
	* optional 5 minute break *	
69	Open 400 IM	70

**WAIVER**

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In consideration of the acceptance of these entries, the undersigned hereby, for myself and all the members of the team I represent together with all heirs, representatives and assigns, waive all claims against United States Swimming and the Wisconsin Swimming Committee, WRAT, and the Waunakee Community School District, and any other agent of this meet for injuries and any other expense incurred by myself or any person on behalf of my club at the meet or on the road to and from the meet.

Signature of Team Official \_\_\_\_\_

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

Team Abbreviation \_\_\_\_\_

Coach(es) \_\_\_\_\_

Address for Final Results  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Name & Phone \_\_\_\_\_

Contact Email \_\_\_\_\_

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**SUMMARY OF ENTRY FEES**

Number of Individual Swims	_____	x \$3.00 =	\$ _____
Number of Swims Reserved	_____	Reservation	\$ _____
Balance Due for additional Swims (enter zero if less)			\$ _____

EXCESS RESERVATION MAY NOT BE APPLIED TOWARD RELAY & SPLASH FEES

Number of Swimmers	_____	x \$2.00 =	\$ _____
Number of Relay Swims	_____	x \$10.00 =	\$ _____
		Total Entry Fee due	\$ _____

Make Checks Payable to: WRAT

Mail Entries to: David Stamsta  
126 Winston Way  
Waunakee, WI 53597  
(608) 850-5751  
Cell: (608) 213-3300  
[davstamsta@aol.com](mailto:davstamsta@aol.com)

Entries must be received by Friday, June 9<sup>th</sup>, 2006