

Lake Country "Phoenix" Swim Team

Fall Single Age High Point Trophy Challenge

Sanction #WI2011-303S

- DATE:** Saturday, October 8, 2011
- PLACE:** ARROWHEAD HIGH SCHOOL, 800 North Ave, Hartland, 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.
Feet-first entries from the starting end of the pool during general warm-ups will be enforced for all sanctioned/approved competition.
- POOL:** Six lane, 25 yard pool, 5'1" starting depth, 3'6" non-starting depth, 30" blocks, non-turbulent lane markers and backstroke flags. The competition course has not been certified in accordance with 104.2.2C(4).
- 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 current USA Swimming Rules shall prevail for this meet. Swimmers must be USA-Swimming registered. Age as of October 8, 2011. Please notify meet officials of any disabled swimmers upon arriving at the meet.
- OFFICIALS:** Meet Referee – Kim Stoll
- ENTRY CHAIR:** Darsi Kohnhorst E-Mail: lakecountryswim@sbcglobal.net
- MEET DIRECTOR:** Mark Kohnhorst
PO Box 181
Hartland, WI 53029
(262) 367-7657
- ENTRY DEADLINES:** Completed entry file must be received by the entry chair no later than **Thursday, September 29, 2011**. Waiver and payment should follow promptly. No phone entries will be taken. This meet is being run with Hy-Tek swim software. Please submit your electronic entries via e-mail. Please note any special requirements for adaptive swimmers on the entry form.
- ENTRY LIMIT:** Swimmers may compete in four (4) individual events plus relays.
- RACING START CERTIFICATION:** Any swimmer entered in the meet, unaccompanied by a USA Swimming member coach, must be certified by a USA Swimming member coach as being proficient in performing a racing start or must start each race from within the water. It is the responsibility of the swimmer or the swimmer's legal guardian to ensure compliance with this requirement.
- FEES:** Individual events \$3.50 per event and \$12.00 per relay. \$2.00 LSC surcharge per swimmer entered in at least one individual event. Deck entries shall be \$7.00/individual event and \$18.00/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 are \$2.00.
- PARKING:** Parking is available in the north lots.
- FINAL RESULTS:** Results will be posted on www.wisconsinswimming.org and e-mailed to participating teams.
- CONDUCT:** Each team is responsible for the conduct of its swimmers. In accordance with the Federal Video Voyeurism Prevention Act of 2004 – the use of camera phones or video recording devices in the locker rooms is prohibited.
- AWARDS:** Senior Events: No Individual or Relay Awards
13&Under Individual Events: Ribbons 1st through 12th
Relay Events: Ribbons 1st through 6th
High Point Awards: 1st through 12th in each age group including Senior.
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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<u>Girls Event #</u>	<u>Event Description</u>	<u>Boys Event #</u>
1	11-Over 200 Free Relay	2
	5 minute break	
3	14-Over 100 Butterfly	4
5	13 100 Butterfly	6
7*	11-Over 200 Butterfly	8*
9	12 50 Butterfly	10
11	11 50 Butterfly	12
13	14-Over 200 IM	14
15	13 200 IM	16
17*	11-Over 400 IM	18*
19	12 200 IM	20
21	11 200 IM	22
23	14-Over 100 Backstroke	24
25	13 100 Backstroke	26
27*	11-Over 200 Backstroke	28*
29	12 50 Backstroke	30
31	11 50 Backstroke	32
33	14-Over 100 Breaststroke	34
35	13 100 Breaststroke	36
37*	11-Over 200 Breaststroke	38*
39	12 50 Breaststroke	40
41	11 50 Breaststroke	42
43	14-Over 100 Freestyle	44
45	13 100 Freestyle	46
47*	11-Over 200 Freestyle	48*
49	12 50 Freestyle	50
51	11 50 Freestyle	52

* Will be scored separately (11, 12, 13 and 14-Over).

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

53	10&Un. 200 Free Relay	54
	5 minute break	
55	7&Un. 25 Butterfly	56
57	8 25 Butterfly	58
59	9 50 Butterfly	60
61	10 50 Butterfly	62
63	7&Un. 100 IM	64
65	8 100 IM	66
67	9 100 IM	68
69	10 100 IM	70
71	7&Un. 25 Backstroke	72
73	8 25 Backstroke	74
75	9 50 Backstroke	76
77	10 50 Backstroke	78
79	7&Un. 25 Breaststroke	80
81	8 25 Breaststroke	82
83	9 50 Breaststroke	84
85	10 50 Breaststroke	86
87	7&Un. 25 Freestyle	88
89	8 25 Freestyle	90
91	9 50 Freestyle	92
93	10 50 Freestyle	94

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 USA Swimming, the Wisconsin Local Swimming Committee of the USA Swimming, the Lake Country Swim Team, the Arrowhead 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 USA 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 that 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 \$3.50 = \$ _____

_____ 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 \$12.00 = \$ _____

_____ LSC Surcharge x \$2.00 = \$ _____

(# of swimmers in Individual Events only)

B: Relay & Surcharge Total = \$ _____

Total of Lines A & B = \$ _____

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

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

Email Entries to: **lakecountryswim@sbcglobal.net**

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