## Lake Country "Phoenix" Swim Team

Winter Single Age High Point Trophy Challenge Sanction #WI2012-108S

DATE: Saturday, January 28, 2012 ARROWHEAD HIGH SCHOOL, 800 North Ave, Hartland, Wisconsin PLACE: 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. Three-point feet-first entries from the starting end of the pool during general warm-ups will be enforced for all sanctioned/approved competition. Six lane, 25 yard pool, 5'1" starting depth, 3'6" non-starting depth, 30" blocks, non-turbulent lane markers POOL: and backstroke flags. The competition course has not been certified in accordance with 104.2.2C(4).s. Colorado System with back-up watches and across the board judging in case of a malfunction. All events TIMING: are timed finals. **OFFICIAL** Official current USA Swimming Rules shall prevail for this meet. Swimmers must be USA-Swimming registered. Age as of January 28, 2012. Please notify meet officials of any disabled swimmers upon RULES: arriving at the meet. Any swimmer entered in the meet 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. When unaccompanied by a member-coach, it is the responsibility of the swimmer or the swimmer's legal guardian to ensure compliance with this requirement. **OFFICIALS**: Meet Referee - Greg Barta ENTRY CHAIR: Darsi Kohnhorst E-Mail: lakecountryswim@sbcglobal.net MEET Mark Kohnhorst DIRECTOR: PO Box 181 Hartland, WI 53029 (262) 367-7657 ENTRY Completed entry file must be received by the entry chair no later than Thursday, January 19, 2012. DEADLINES: 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. Individual events \$3.50 per event and \$12.00 per relay. \$2.00 LSC surcharge per swimmer entered in at FEES: 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. Each team is responsible for the conduct of its swimmers. In accordance with the Federal Video CONDUCT: Voyeurism Prevention Act of 2004 – the use of camera phones or video recording devices in the locker rooms is prohibited. Senior Events: No Individual or Relay Awards AWARDS: 13&Under Individual Events: Ribbons 1<sup>st</sup> through 12<sup>th</sup> Ribbons 1<sup>st</sup> through 6<sup>th</sup> Relay Events: 1<sup>st</sup> through 12<sup>th</sup> in each age group including Senior. High Point Awards: 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>	<b>Event Description</b>	<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		
* \\/ill be	scored senarately $(11 \ 12)$	13 and $14$ -Over)		

\* 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 5 minute break	54
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	
Signature of Club Offi	cial, Parent or Guardian	(Four Only)	
Name:		Day Phone Number:	
Title:		Evening Phone Number	
City, State, Zip		E-Mail	
	lem, weather or other unforeseen circun le for participant notification.	nstance which would require cancellation or del	ay of meet who may we
Emergency Contact: _		Phone:	
Name of coach or team representative(s) at meet:			_ AM / PM
(Must have current Coa	ch's credentials to be on deck)		AM / PM
Entry Fee Recap:	Individual Events x \$3	3.50 = \$	
		eck = -\$ lay not be used for relays or surcharges) Total = \$	
	Relay Teams x \$12.0	0 = \$	
	LSC Surcharge x \$2.0 (# of swimmers in Individual Events		
	<b>B:</b> Relay & Su	urcharge Total = \$	
	Total of Lin	nes A & B = \$	
Make checks payable to	o: Lake Country Swim Team	Check #	
Mail Entries to:	Lake Country Swim Team c/o Da PO Box 181 Hartland, Wisconsin 53029	arsi Kohnhorst	
Email Entries to:	lakecountryswim@sbcglobal.ne	t	
Questions:	Lake Country Team Office (262) 36	67-7657	