

**Shawano Community Swimming Club**  
**Summer Heat Meet (Open)**  
**Sat. May 30, 2009**

**LOCATION:** Shawano Community High School Pool  
220 County Hwy B, Shawano, WI 54166 Phone (715) 526-2175

**FACILITY:** 25 yd., 6 lanes, backstroke flags, non-turbulent lane dividers. Starting depth 5.5 ft. with turn side depth of 3.5 ft. Starting block height 30 inches. Colorado timing system with touchpads will be used, back up of 2 watches per lane will be available.

The competition course has not been certified in accordance with 104.2.2(C)

**SANCTION NUMBER: # 2009-124WI**

**RULES:** Swimmers must be registered with USA Swimming.  
No smoking is allowed on premises.

**AGE GROUPS:** **AM Session** 8 & Under, 9-10  
**PM Session** 11-12, Open  
(Age as of Sat. May 30, 2009)

**ENTRY FEES:** \$3.00 per swimmer "SPLASH FEE"  
\$3.00 per individual event  
\$10.00 per relay

**ADMISSION:** \$3.00 for 12 years and older. Under 12-free  
Heat sheets available for \$3.00. Admission & heat sheet together for \$5.00.

**ENTRY INFORMATION:** Swimmers may compete in a maximum of 4 individual events plus relays. Please submit entries on Hy-Tek by e-mail to [pvillez@frontiernet.net](mailto:pvillez@frontiernet.net). Send a hard copy back-up (and disk if e-mail not available) along with entry fee check. Make checks payable to:

Shawano Community Swimming Club (SCSC)

Mail to: Paul Villez  
421 S Weed St  
Shawano WI 54166

**DECK ENTRY:**

No deck registration will be allowed. Deck entries will be taken as long as they don't result in any additional heats. Deadline for deck entries is 7:30 am for morning session; and 30 minutes after the start of afternoon warm-ups for afternoon session.

**DEADLINE FOR ENTRIES:** Wednesday, May 20, 2009

**MEET DIRECTOR:** Kris Labby  
1045 S Andrews St  
Shawano WI 54166  
(715) 526-5625  
[labby1@charter.net](mailto:labby1@charter.net)

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**SCHEDULE: AM Session:**

Warm-ups 7:00am-8:00am  
Timers Meeting 8:00am  
Coaches Meeting 8:00am  
Meet starts at 8:15am

**PM Session:**

Warm-ups will begin after event # 32  
for 60 minutes; meet will start  
immediately after warm-ups.

**WARM-UP:** Sit and Slide entry from the starting end of the pool will be enforced.  
First 20 minutes – Circle swim all lanes 1-6  
Next 20 minutes – Lanes 3 & 4 – Sprints; Lanes 1,2,5,6 – Circle swim  
Last 20 minutes – Lanes 2,3,4,5 – Sprints; Lanes 1,6 – Circle swim

**RELAYS & POOL DEPTH:** Because the water depth at the turn side of the pool is less than 4 feet, the 100 yard relays will follow this procedure: the 2nd and 4th leg of the relay will start in the water. It is planned that the 25 yd individual events will start at the starting blocks. If any 25 yd races start on the turn side of the pool, the swimmers will start in the water.

**DISABLED SWIMMERS:** Please notify Meet Director in advance of special needs.

**MEET OFFICIAL:** Judy Felts (SCSC)

**DRESSING ROOMS:** Dressing rooms have limited lockers. Swimmers are responsible for securing their own belongings. Shawano Community Swimming Club is not responsible for lost items. There will be a lost and found located in the pool lobby area. 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. Lounging will be down the hall from the pool in the commons.

**AWARDS:** Heat Winner awards will be provided.  
Individual awards for 1-12<sup>th</sup> place.  
Relay ribbons for 1-5<sup>th</sup> place.  
Results will be posted as available in the hallway outside pool area.

**FOOD:** Food will be available in the commons area. No food or drink is permitted in the pool area, except plastic water bottles.

**FIRST AID:** Located in the pool office.

**CONDUCT:** Each team is responsible for the behavior of its swimmers. Any violation or misconduct may result in disqualification of swimmer's individual event. All teams competing must keep the deck area as clean as possible.

**COACHES NOTE:** A USA Swimming registered coach must be on deck at all times. All coaches are to pick up their coaches packet in person and must show their USA coach's card.

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<u>Girls</u>	<u>Events</u>	<u>Boys</u>
1	8 & U 100 Medley Relay	2
3	10 & U 200 Medley Relay	4
5	8 & U 25 Free	6
7	9-10 100 Free	8
9	8 & U 100 IM	10
11	9-10 200 IM	12
13	8 & U 25 Fly	14
15	9-10 50 Fly	16
17	8 & U 25 Breast	18
19	9-10 100 Breast	20
21	10 & U 200 Free	22
23	8 & U 25 Back	24
25	9-10 50 Back	26
27	8 & U 100 Free Relay	28
29	10 & U 200 Free Relay	30
	<b>**WARM—UP BREAK FOR 500 FREE**</b>	
31	Open 500 Free	32
	<b>**BREAK**</b>	
33	11-12 200 Medley Relay	34
35	Open 200 Medley Relay	36
37	11-12 100 Free	38
39	Open 100 Free	40
41	11-12 200 IM	42
43	Open 200 IM	44
45	11-12 50 Fly	46
47	Open 100 Fly	48
49	11-12 50 Breast	50
51	Open 100 Breast	52
53	11-12 200 Free	54
55	Open 200 Free	56
57	11-12 100 Back	58
59	Open 200 Back	60
61	11-12 200 Free Relay	62
63	Open 200 Free Relay	64

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**OFFICIAL ENTRY FORM—ALL MEET AND RELAY ENTRY FORMS MUST BE SUBMITTED WITH THIS WAIVER.**

**NAME OF CLUB:** \_\_\_\_\_ **USA CLUB CODE** \_\_\_\_\_

**NUMBER OF :**

\_\_\_\_\_ **SWIMMERS (SPLASH FEE) @ \$3.00**                      \$ \_\_\_\_\_

\_\_\_\_\_ **INDIVIDUAL EVENTS @ \$3.00**                                      \$ \_\_\_\_\_

\_\_\_\_\_ **RELAY EVENTS @ \$10.00**    \$ \_\_\_\_\_

**Subtract reservation already paid**                      - \$ \_\_\_\_\_

**Make Check payable to "SCSC"                                      TOTAL \$** \_\_\_\_\_

In consideration of acceptance of this entry, I/we hereby, for myself/ourselves, my/our heirs, administrators, and assigns, waive and release any and all claims against USA Swimming, WI LSC, Shawano Community High School, Shawano Community Swimming Club, and its Board of Directors and the meet officials, for injuries and/or expense incurred by me/us at the meet, or while on the road to and from the meet. I/we are bonafide amateur athlete(s) and eligible to compete in all events I/we have entered.

**Signature of Club Official:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Name of Coach/coaches:** \_\_\_\_\_

**Contact person regarding this Entry:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Entries along with the signed waiver and fees must be received by Wed. May 20, 2009. Please make checks payable to **Shawano Community Swimming Club (SCSC)**. See information sheet for entry limits and fee requirements. Deck entries will only be done as long as they don't result in additional heats. Fees will be refunded only if for unforeseen reasons this meet is cancelled.

**Mail all signed forms and fees to: Paul Villez  
421 S Weed St  
Shawano WI 54166  
(715) 524-5908  
pvillez@frontiernet.net**