

Lake Country Fall Senior Meet

Hosted By: Lake Country Swim Team

Sanction #2006-102WI

- DATE:** Friday October 13, 2006
- PLACE:** ARROWHEAD HIGH SCHOOL, 800 North Ave, Hartland, Wisconsin
- WARMUP:** Warm-up: 4:00-5:00 PM as follows: 4:00-4:30 circle swim all lanes NO diving. 4:30-5:00 one-way Sprint and push 50's lanes as needed. Meet starts at 5:05 AM. The diving well will be available for warm-down and warm-up throughout the meet.
- POOL:** Six lane, 25 yard pool, 5'1" starting depth, 30" blocks, non-turbulent lane markers and backstroke flags.
- TIMING:** Colorado System with back-up watches and across the board judging in case of a malfunction. All events are timed finals. Computerized scoreboard used for all lanes.
- OFFICIAL** Official current USA Swimming Rules shall prevail for this meet. Swimmers must be
USS RULES: registered swimmers. Age as of October 13, 2006. Please notify meet officials of any adaptive swimmers upon arriving at the meet.
- OFFICIALS:** To be announced.
- ENTRY CHAIR** Darsi Kohnhorst E-Mail: lakecountryswim@sbcglobal.net
- MEET** Mark Kohnhorst
DIRECTOR: PO Box 181
Hartland, WI 53029 (262) 367-7657
- ENTRY LIMIT:** Swimmers may compete in three (3) individual events.
- LIMITED EVENTS:** The 400 IM and 500 Free may be limited to the top 24 entered times. The 1650 may be limited to the top 16 entered times.
- 1650 Free:** Each swimmer in the 1650 Free MUST provide his/her own timer and counter.
- FEES:** Individual events \$3.00 per event. \$2.00 LSC surcharge per swimmer. Deck entries shall be \$6.00 / individual event. Entry fees must accompany the official entry forms and are not refundable.
- ENTRY DEADLINES:** Completed entry form, waiver and fees must be received no later than Friday October 6, 2006 by the entry chair. No phone entries will be taken. This meet is being run with **Hy-Tek swim software**. Teams wishing to submit their entries via disk or e-mail are encouraged to do so. No seed times will be changed once the entry chair has seeded the meet. Please note any special requirements for adaptive swimmers on the entry form.
- ADMISSIONS:** Spectators over 13 years old are \$2.00 and includes heat sheets.
- PARKING:** Parking is available in the north lot.
- FINAL** One copy of meet results will be sent to each team represented. All others wishing results can order
RESULTS: them at the admissions table for \$5.00 per copy. Results will be emailed to teams providing email address.
- CONDUCT:** Each team is responsible for the conduct of its swimmers.
- AWARDS:** None
- FOOD:** A limited selection of food and beverages will be available.

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October 13, 2006

<u>Women</u>	<u>Event</u>	<u>Men</u>
1	100 Fly	2
3	500 Free	4
5	200 Breast	6
7	100 Back	8
9	50 Free	10
11	400 IM	12
10 Minute Warm-up Break		
13	200 Free	14
15	200 Fly	16
17	100 Breast	18
19	200 Back	20
21	100 Free	22
23	200 IM	24
24	1650 Free	26

* May Be Limited To Top 24

** May Be Limited To Top 16 – Run Fastest To Slowest Alternating Women/Men

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 United States Swimming, the Wisconsin Local Swimming Committee of the United States 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 United States 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 also are aware that it is our responsibility to ensure that every athlete and coach participating in the meet are registered United States members. 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 (Final results will be mailed to this address)

Name: _____ Phone Number: _____

Address: _____

City, State, Zip : _____

Name of coach or team representative at meet: _____

Emergency phone number in case of weather or facility problem: _____

Entry Fee Recap: _____ Individual Events x \$3.00 = \$ _____

_____ Less Reservation Check = -\$ _____
(Only to be used for Ind. Events!)

A: Entry Fees Total = \$ _____

_____ LSC Surcharge x \$2.00 = \$ _____
(# of swimmers in Ind. Events only)

B: 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 Office (262) 367-7657**