

Scenic City – Dalton - CPR Tri-Meet 2011 November 5 & 6, 2011

This meet will be conducted under the auspices of Southeastern Swimming, Inc. of the United States Swimming, the rules of which will apply. Southeastern Swimming Meet Safety Guidelines and Warm-up Procedures will be in effect at this meet. All unattached swimmers must have a currently certified USA swimming coach member responsible for their warm-up.

SES SANCTION # 11SESCAC11-5 Time Trial # 11SESCAC11-5TT

HOST CLUB: Scenic City Aquatic Club

OFFICIALS: Meet director: Cathy Forsthoffer
Head referee: Mark Arnold
Starter: Robin Garaguso
Stroke and Turn: James Bevill, Cecilia Wigal
Meet Marshall: Stan Corcoran

LOCATION: The McCallie School Sports Complex
500 Dodds Ave.
Chattanooga, TN 37404

START TIMES: Saturday and Sunday 9:30AM warm-up 8:00 AM

FACILITIES: 11 lane 25 yard pool. 8 lanes for competition. The competition course has been certified in accordance with 104.2.2c(4). The copy of such certification is on file with USA swimming. Non-turbulent lane ropes. Minimum depth 4 feet. Maximum depth 14 feet. Balcony seating for 500. Gymnasium rest area for swimmers with concession stand and swim shop. **Use of audio or visual recording devices, including a cell phone, is not permitted in changing areas, rest rooms or locker rooms.**

ELIGIBILITY: All participants must be 2011 or 2012 USA Swimming registered athletes. **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 from within the water. It is the responsibility of the swimmer or the swimmer's legal guardian to ensure compliance with this requirement.**

Rules: The 2011 USA rules will govern the conduct of the meet unless noted otherwise herein. All events will be timed finals.

AGE: The swimmer's age on the first day of the meet will determine his or her age for the entire meet.

ENTRIES: Swimmers may enter up to 4 events and 1 relay per session.

FEES: \$4.00 per individual event - \$5.00 late entry fee
\$8.00 per relay event - \$10.00 late entry fee
\$3.00 per swimmer surcharge for Southeastern LSC swimmers
\$5.00 per swimmer surcharge for out of SES LSC swimmers

DEADLINE: All entries must be received by Monday, October 31, 2011. Please use Hytek team manager meet entry program. You may email entry to rdahlke1@bellsouth.net

Completed entries should be mailed to:

John Woods
Scenic City Aquatic Club
205 Island Ave.
Chattanooga, TN 37405

SEEDING: Time Final seeding will be used

AWARDS: Ribbons 1st – 8th for 12 and under individual events only. Heat winner ribbons for 12 and under events

SCORING: Only the top 4 swimmers & top 2 relays will score for each team.
Individual Events: 9,7,6,5,4,3,2,1
Relay Events: 18,14,12,10,8,6,4,2

LATE ENTRIES: Will be accepted at the meet on a lane available basis.

HOSPITALITY: A concession stand will be available. Drinks and snacks will be provided to coaches, officials, and meet workers.

MEET EVALUATIONS: Please send comments, suggestions, or evaluations concerning the meet to:

Southeastern Swimming General Chairman
John Woods
205 Island Ave.
Chattanooga, TN 37405

Scenic City, Dalton, Chattanooga Parks and Recreation Tri-Meet

Saturday, November 5, 2011

Warm-ups @ 8:00 AM Meet starts @ 9:30 AM

| <u>Girls</u> | <u>Event</u> | <u>Boys</u> |
|------------------------|-------------------------|-------------|
| 1 | Senior 200 Freestyle | 2 |
| 3 | 13 - 14 200 Freestyle | 4 |
| 5 | 11 - 12 200 Freestyle | 6 |
| 7 | 10 & U 200 Freestyle | 8 |
| 9 | 8 & U 100 Freestyle | 10 |
| 11 | Senior 100 Butterfly | 12 |
| 13 | 13 - 14 100 Butterfly | 14 |
| 15 | 11 - 12 50 Butterfly | 16 |
| 17 | 10 & U 50 Butterfly | 18 |
| 19 | 8 & U 25 Butterfly | 20 |
| 21 | Senior 200 Breaststroke | 22 |
| 23 | 13-14 200 Breaststroke | 24 |
| 25 | 11-12 100 Breaststroke | 26 |
| 27 | 10 & U 100 Breaststroke | 28 |
| 29 | 8 & U 50 Breaststroke | 30 |
| 31 | Senior 100 Freestyle | 32 |
| 33 | 13 - 14 100 Freestyle | 34 |
| 35 | 11 - 12 100 Freestyle | 36 |
| 37 | 10 & U 100 Freestyle | 38 |
| 39 | 8 & U 50 Freestyle | 40 |
| 41 | Senior 200 Backstroke | 42 |
| 43 | 13 - 14 200 Backstroke | 44 |
| 45 | 11-12 100 Backstroke | 46 |
| 47 | 10 & U 100 Backstroke | 48 |
| 49 | 8 & U 50 Backstroke | 50 |
| 51 | 11-12 200 IM | 52 |
| 53 | 10 & U 200 IM | 54 |
| 55 | Senior 200 Free Relay | 56 |
| 57 | 13 - 14 200 Free Relay | 58 |
| 59 | 11 - 12 200 Free Relay | 60 |
| 61 | 10 & U 200 Free Relay | 62 |
| 63 | 8 & U 100 Free Relay | 64 |
| 10 Minute Break | | |
| 65 | Senior 400 IM | 66 |

Sunday, November 6, 2011
Warm-ups @ 7:30 AM Meet starts @ 9:00 AM

| <u>Girls</u> | <u>Event</u> | <u>Boys</u> |
|------------------------|--------------------------|-------------|
| 67 | Senior 100 Backstroke | 68 |
| 69 | 13 – 14 100 Backstroke | 70 |
| 71 | 11 – 12 50 Backstroke | 72 |
| 73 | 10 & U 50 Backstroke | 74 |
| 75 | 8 & U 25 Backstroke | 76 |
| 77 | Senior 200 Butterfly | 78 |
| 79 | 13 - 14 200 Butterfly | 80 |
| 81 | 11-12 100 Butterfly | 82 |
| 83 | 10 & U 100 Butterfly | 84 |
| 85 | 8 & U 50 Butterfly | 86 |
| 87 | Senior 50 Freestyle | 88 |
| 89 | 13 – 14 50 Freestyle | 90 |
| 91 | 11-12 50 Freestyle | 92 |
| 93 | 10 & U 50 Freestyle | 94 |
| 95 | 8 & U 25 Freestyle | 96 |
| 97 | Senior 100 Breaststroke | 98 |
| 99 | 13 - 14 100 Breaststroke | 100 |
| 101 | 11-12 50 Breaststroke | 102 |
| 103 | 10 & U 50 Breaststroke | 104 |
| 105 | 8 & U 25 Breaststroke | 106 |
| 107 | Senior 200 IM | 108 |
| 109 | 13 - 14 200 IM | 110 |
| 111 | 11-12 100 IM | 112 |
| 113 | 10 & U 100 IM | 114 |
| 115 | 8 & U 100 IM | 116 |
| 117 | Senior 200 Medley Relay | 118 |
| 119 | 13 – 14 200 Medley Relay | 120 |
| 121 | 11-12 200 Medley Relay | 122 |
| 123 | 10 & U 200 Medley Relay | 124 |
| 125 | 8 & U 100 Medley Relay | 126 |
| 10 Minute Break | | |
| 127 | Senior 500 Freestyle | 128 |

Scenic City, Dalton, Chattanooga Parks and Recreation

Tri meet

November 5 and 6, 2011

ENTRY FORM SUMMARY

TEAM NAME: _____ ABBRV: _____

TEAM ADDRESS: _____

TEAM

COACH: _____ TELEPHONE#: _____

TEAM

REP: _____ TELEPHONE#: _____

Total number of SES swimmers _____ X \$3.00 Surcharge = \$ _____
Total number of GA LSC swimmers _____ X \$5.00 Surcharge = \$ _____
TOTAL EVENTS ENTERED _____ X \$4.00 Entry fee = \$ _____
TOTAL DUE \$ _____

PLEASE LIST PARENTS ON YOUR TEAM WHO ARE USA OFFICIALS WHO WOULD LIKE TO WORK THIS MEET:

OFFICIALS NAME: _____ PHONE #: _____

OFFICIALS NAME: _____ PHONE #: _____

OFFICIALS NAME: _____ PHONE #: _____

OFFICIALS NAME: _____ PHONE #: _____

WAIVER, ACKNOWLEDGMENT AND LIABILITY RELEASE:

I, the undersigned coach or team representative verify that all of the swimmers and coaches listed on the enclosed entry forms are registered with U.S.A. Swimming. I acknowledge that I am familiar with the safety rules of U.S.A. Swimming regarding warm-up procedures and I shall be responsible for the compliance of my swimmers with those rules during this meet. Any organization associated with The 2011 SCAC Tri Meet including the McCallie School, meet sponsors, Southeastern Swimming, Inc., U.S.A. Swimming, Inc., the Scenic City Aquatic Club, its agents, employees and coaches shall be free from any liability or claim for damages rising of injury to anyone during the conduct of the meet.

SIGNATURE

DATE

TITLE

USA Swimming Registered Coaches Attending This Meet:

SOUTHEASTERN LSC
INFORMATION FORM FOR SWIMMERS WITH A DISABILITY
This non mandatory form is for accommodation purposes.

Name _____

Address _____

Team _____ USA Registration # _____

Age and Birth Date: _____/_____/_____

Events to be Swum: _____/_____/_____/_____/_____/_____/_____

_____/_____/_____/_____/_____/_____/_____/_____/_____/_____

| Meet Name | Location | Meet Date |
|-----------|----------|-----------|
| _____ | | |

Type of Disability

Blind Cognitive / Intellectual Deaf Physical Other _____

Extent of Disability: Be specific e.g. totally or partially blind, totally or partially deaf, loss of one or more limbs, multiple disabilities, etc.

The following person(s) will accompany the swimmer for any needed assistance:

Accommodations requested, Examples: Lane #, inside lane, starter side preference, assistance to the blocks, water start, hand signals, etc.

Information gathered on this form will only be used for swimmers accommodation during Meet, and forwarded to the SE LSC Disability chair for purposes of evaluation and tracking Swimmers attendance and performance. The Disability Chair welcomes any feedback and or comments concerning your Meet experience.

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This form can be attached to an email to the Meet Referee or printed and carried with you to the meet.

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Disability Chair Email: walleybob@hotmail.com

Please duplicate as needed

| | | EVENT # | EVENT NAME | BEST TIME | EVENT # | EVENT NAME | BEST TIME |
|----------------------|-----|---------|------------|-----------|---------|------------|-----------|
| NAME OF SWIMMER | | | | | | | |
| USS REGISTRATION NO. | | | | | | | |
| DATE OF BIRTH | SEX | | | | | | |
| NAME OF SWIMMER | | | | | | | |
| USS REGISTRATION NO. | | | | | | | |
| DATE OF BIRTH | SEX | | | | | | |
| NAME OF SWIMMER | | | | | | | |
| USS REGISTRATION NO. | | | | | | | |
| DATE OF BIRTH | SEX | | | | | | |
| NAME OF SWIMMER | | | | | | | |
| USS REGISTRATION NO. | | | | | | | |
| DATE OF BIRTH | SEX | | | | | | |