

Scenic City October Invitational October 9 & 10, 2010

The meet will be conducted under the auspices of Southeastern Swimming, Inc. of the United States Swimming, the rules of which will apply.

SES SANCTION #: 10SESCAC10-29

HOST CLUB: The Scenic City Aquatic Club and the McCallie School

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

FACILITIES: 11 lane 25 yard pool. 10 lanes for competition. 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.

MEET SCHEDULE: Saturday and Sunday Warm-ups 7:30 AM, Competition 9:00 AM

ELIGIBILITY: All swimmers must be registered with United States Swimming, Inc. and registration numbers must be listed on the entry form. ***No entries will be accepted without current and valid registration numbers.***

RULES: 2010 USA Swimming Rules will govern the meet.

MEET FORMAT: All Events will be Timed Finals. Age groups are: 8 & U, 10 & U, 11-12, and Senior.

A swimmer's age on the first day of the meet determines the age group for the entire meet.

All events will be pre-seeded except for the 500 Freestyle, which will be deck seeded. Positive check-in with the Clerk of Course for all deck-seeded events is required in order to swim.

Failure to check-in with the Clerk of Course by the deadline will scratch the swimmer. The positive check-in deadline will be 30 minutes after the start of the afternoon session.

PROCEDURE FOR POSITIVE CHECK-IN OR SCRATCHING. Only the swimmer or his/her coach may check-in or scratch a swimmer. **If swimming an event**, the swimmer or his/her coach shall circle the name of the swimmer and place their initials next to the swimmer's name. **If scratching the event**, the swimmer or coach shall line through the swimmer's name and place their initials next to the swimmer's name.

DEADLINES FOR CHECK-IN: 30 minutes before the start of that day's events.

SCRATCH PENALTIES FOR DECK-SEEDED EVENTS: Any swimmer failing to swim an event after a positive check-in will result in the swimmer being barred from his/her next individual event.

RELAY CHECK-IN - Relay cards will be distributed in the coach's packets. Cards must list the relay swimmers in order and turned in at the block. Scratches should be turned into the meet referee one hour before the relay event.

ENTRIES: A swimmer may swim ***five individual events per day.***

Acceptable entries must be legible and complete. Enter Short course yards times or "NT" for no time. Entry forms must include the swimmer's first and last name, age, USS registration number and the yard times for each individual event entered. Relay times should be listed for each entered relay. ***All potential relay participants must be entered in the meet by the start of the session the relay is participating.*** Teams who have HYTEK'S TEAM MANAGER should

submit their entries on a CD. Disk with results will be returned at the end of the meet. Also provide hard copy printout for proof reading.

FEES: \$4.00 per swimmer per individual event
\$8.00 per relay
\$3.00 Southeastern surcharge per swimmer
\$5.00 out of LSC surcharge per out of LSC swimmer

DEADLINE: All entries must be received by Wednesday September 29, 2010. Checks should be payable to the **Scenic City Aquatic Club**.

LATE ENTRIES: Late entries will be accepted on an available lane at the discretion of the meet entry chairman. No new heats will be formed after the meet has been seeded. Coaches must make out entry cards for late entries at the meet. Late entered Relays will be given a "No Time" seeding. Accepted late entries will be charged \$5.00 per individual event and \$10.00 per relay.

Mail entries to **John Woods**
 205 Island Ave.
 Chattanooga, TN 37405
 Email rdahlke1@bellsouth.net

WAIVER AND RELEASE: By entering the meet, each swimmer, the swimmer's club, and the swimmer's coach waive, release and relinquish any claim, demand, or cause of action they have or may have against the Scenic City Aquatic Club, The McCallie School, Southeastern Swimming, Inc. or United States Swimming, Inc. for any injury or damage to person or property arising out of or in any way related to the competition or occurring in the swimming venue. Each such swimmer, club and coach agrees not to assert any claim or seek compensation or damages of any kind or nature from or against the Scenic City Aquatic Club, The McCallie School or United States Swimming, Inc.

SAFETY: in the interest of safety, coaches, swimmers and spectators are asked to observe all posted pool rules and conduct themselves in a prudent manner. **Southeastern Swimming Safety Guidelines and Warm-up Procedures will be in effect.**

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.

SCORING: There will be no team scoring for this event

AWARDS: Ribbons will be given for 1st-8th place for individual events and 1st-4th for relays in 12 and under events.

Coaches and Officials: Please display your current certification cards at all times on the deck.

OFFICIALS:

Meet Referee: Elliot Peigen
Head Starter: Mark Arnold
Stroke and Turn: Robin Garaguso, Donna Bryant, Cecilia Wigal
Meet Marshall: Stan Corcoran

CONTACTS:

Meet Director: Cathy Forsthoffer Forsthof@yahoo.com

EVALUATION: Any specific problems or concerns about the meet that are not resolved during the meet or to your satisfaction should be communicated in writing immediately to the chairperson of Southeastern Swimming. **John Woods**
205 Island Ave.
Chattanooga, TN 37405

Scenic City Invitational Order of Events

Saturday, October 09, 2010
Warm-ups @ 7:30 AM Meet starts @ 9:00 AM

<u>Girls</u>	<u>Event</u>	<u>Boys</u>
1	Senior 100 Backstroke	2
3	11-12 50 Backstroke	4
5	10 & U 50 Backstroke	6
7	8 & U 25 Backstroke	8
9	Senior 200 Butterfly	10
11	11-12 100 Butterfly	12
13	10 & U 100 Butterfly	14
15	8 & U 50 Butterfly	16
17	Senior 50 Freestyle	18
19	11-12 50 Freestyle	20
21	10 & U 50 Freestyle	22
23	8 & U 25 Freestyle	24
25	Senior 100 Breaststroke	26
27	11-12 50 Breaststroke	28
29	10 & U 50 Breaststroke	30
31	8 & U 25 Breaststroke	32
33	Senior 200 IM	34
35	11-12 100 IM	36
37	10 & U 100 IM	38
39	8 & U 100 IM	40
41	Senior 200 Medley Relay	42
43	11-12 200 Medley Relay	44
45	10 & U 200 Medley Relay	46
47	8 & U 100 Medley Relay	48
10 Minute Break		
49	Senior 500 Freestyle	50

Sunday, October 10, 2010
Warm-ups @ 7:30 AM Meet starts @ 9:00 AM

<u>Girls</u>	<u>Event</u>	<u>Boys</u>
51	Senior 200 Freestyle	52
53	11-12 200 Freestyle	54
55	10 & U 200 Freestyle	56
57	8 & U 100 Freestyle	58
59	Senior 100 Butterfly	60
61	11-12 50 Butterfly	62
63	10 & U 50 Butterfly	64
65	8 & U 25 Butterfly	66
67	Senior 200 Breaststroke	68
69	11-12 100 Breaststroke	70
71	10 & U 100 Breaststroke	72
73	8 & U 50 Breaststroke	74
75	Senior 100 Freestyle	76
77	11-12 100 Freestyle	78
79	10 & U 100 Freestyle	80
81	8 & U 50 Freestyle	82
83	Senior 200 Backstroke	84
85	11-12 100 Backstroke	86
87	10 & U 100 Backstroke	88
89	8 & U 50 Backstroke	90
91	11-12 200 IM	92
93	10 & U 200 IM	94
95	Senior 200 Freestyle Relay	96
97	11-12 200 Freestyle Relay	98
99	10 & U 200 Freestyle Relay	100
101	8 & U 100 Freestyle Relay	102
10 Minute Break		
103	Senior 400 IM	104

Scenic City October Invitational

CLUB _____ INITIALS _____

ADDRESS _____

CONTACT PERSON _____

PHONE NO. _____

E-mail _____

COACHES ATTENDING:

NUMBER OF SWIMMERS ENTERED _____

UNATTACHED _____

Southeastern LSC Surcharge @ \$3.00/swimmer _____

Out of LSC Surcharge @ 5.00 /swimmer _____

Amount of event charge @ \$4.00/event _____

Amount of relay charges @ \$8.00/relay _____

TOTAL CHARGE _____

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 are registered with USA Swimming. I also acknowledge that I am familiar with the rules of USA Swimming and Southeastern Swimming, Inc. regarding warm-up procedures and meet safety guidelines, and that I shall be responsible for the compliance of my team's swimmers with those rules during this meet. Scenic City Aquatic Club and the McCallie School, Southeastern Swimming, Inc. and USA Swimming, their agents, officers, representatives, employees and coaches shall be free from any liability or claim for damages for any and all injuries, illnesses or damage to valuables which may be sustained at this meet or while in transit to and from this meet. I also acknowledge that by entering this meet, I am granting permission for the names of any or all of my team's swimmers to be published on the internet in the form of Psych Sheets, Meet Results or any other documents associated with the running of this meet.

Signature of coach or club official:

Club: _____

Date: _____

Title: _____

CONSOLIDATED ENTRY FORM
Times should be in Short course yards

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						
NAME OF SWIMMER							
USS REGISTRATION NO.							
DATE OF BIRTH	SEX						

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: _____/_____/_____/_____/_____/_____/_____/_____
_____/_____/_____/_____/_____/_____/_____/_____

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.

Disability Chair Walter Smalley Email: walleybob@hotmail.com 901-486-1782

Meet Director Email Cathy Forsthoffer Forsthof@yahoo.com

Meet Referee Email Larry Alexander larrydalexander@aol.com

Southeastern Swimming General Chairman John Woods flipper@gps.edu