

Oshkosh Community YMCA's

Dolphin Champion Meet

Featuring

Dave Denniston

NOVEMBER 20-22, 2009

APPROVAL # 2009

Location: Oshkosh Community YMCA
Philip R. Kuhn Pool
3303 W. 20th Avenue
Oshkosh, WI 54904

Directions: **From Hwy 41 South (traveling from Appleton)** take the 9th street exit. Turn right onto 9th and then a quick left onto the west side frontage road. Take the frontage road to 20th. Take a right (west) onto 20th Avenue. Drive 1 ½ miles on 20th and the YMCA will be on the left.
From Hwy 41 North (traveling from Fond Du Lac) Take the Hwy 44 exit. Turn left and cross over Hwy 41. Take a right onto the west side frontage road. Take the frontage road to 20th Avenue. Take a left (west) onto 20th. Drive approximately 1-½ miles on 20th and the YMCA will be on the left.

Facility: 8 lane, 25 yard pool with 7' wide lanes and non turbulent lane dividers, back stroke flags, 30" high starting blocks, 9' depth at the starting blocks and 3'6" depth at the shallow end. The Competition Course has not been certified in accordance with USA Swimming's Rule 104.2.2(c).

Host team: Oshkosh YMCA Dolphins

Meet Director: Jay Coleman (920)-230-8439x124 or jaycoleman@oshkoshymca.org

Rules/Eligibility: USA Swimming rules prevail for the meet. Swimmers will swim their age as of November 20, 2009. In the 100 yard relay, the 2nd and 4th swimmer must start in the water. Swimmers should be prepared to use fly over starts. [Feet First three-point](#) entries from the starting end of the pool during general warm-ups will be enforced for all sanctioned/approved competition.

Special needs: The coach of any swimmer with special needs should notify the meet referee before the session(s) that swimmer is participating in.

Meet Schedule: **Friday**

Warm-ups for all ages

4:30-5:25 PM

Saturday + Sunday

Warm-ups for 10+Under

7:00 – 7:55 AM

Warm-ups for 11+Over

Immediately following AM session
(60 minute warm-up session)
Not before 11AM

OFFICIALS: Michael Patton, Head Referee

Meet Format: The meet will be pre-seeded. With the exception of the 8+U's, swimmers should report directly to the blocks for each event. The 8+U's should report to the clerk of course for all individual events. *8+U relays should report directly to the blocks.* All 8+U races will start from the block end. **The entries in Open 1650 free and Open 400 IM may be limited to ensure compliance with the 4-hour rule. If entries need to be limited the fastest seed times will swim. Any swimmer displaced from an event will be allowed to replace it with another event.**

Entry Limit: Three (3) individual events plus one (1) relay per day / Seven (7) individual events and two (2) relays for the entire meet

Entry Fees: \$4.25 per event for individual events

\$16.00 per event for relays

\$3.00 surcharge per swimmer

MAKE CHECKS PAYABLE TO **OSHKOSH YMCA SWIM TEAM**

Conduct: All clubs will be responsible for the conduct of their own swimmers. The Meet Director has the authority to disqualify swimmers found misbehaving. Only coaches, swimmers, officials and meet workers are allowed on deck. Coaches must display YMCA or USS credentials at all times while on deck.

Concessions: An outstanding menu of food and drink will be available in the lobby/commons area on Friday, Saturday, and Sunday.

Conduct: 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.

Entry format: Email a Zipped Hy-tek file to jaycoleman@oshkoshymca.org

Please send the wavier and entry fee check to:

Jay Coleman
Oshkosh YMCA Swim Team
3303 W. 20th Avenue
Oshkosh, WI 54904

Entry Deadline: Entries must be received by **Wednesday, November 4, 2009**
You may update times after the deadline.

Scoring: 1st through 8th place (9,7,6,5,4,3,2,1)

Awards: Individual High Point Awards (1st – 3rd)

Individual events: Ribbons 1st - 16th

Relay events: Ribbons 1st - 8th

Champion Meet Order of Events

<u>Friday</u>		G	B
400 IM	Open	1	2
100 free	8+U	3	4
200 free	10+U	5	6
500 free	11+12	7	8
1650 free	Open	9	10

<u>Saturday AM</u>		G	B
100 free	10+U	11	12
100 medley relay	8+U	13	14
200 medley relay	10+U	15	16
50 breast	8+U	17	18
100 breast	10+U	19	20
25 fly	8+U	21	22
50 fly	10+U	23	24
50 back	8+U	25	26
100 back	10+U	27	28
25 free	8+U	29	30
100 IM	10+U	31	32

<u>Sunday AM</u>			
100 IM	8+U	47	48
200 IM	10+U	49	50
100 free relay	8+U	51	52
200 free relay	10+U	53	54
25 back	8+U	55	56
50 back	10+U	57	58
50 fly	8+U	59	60
100 fly	10+U	61	62
25 breast	8+U	63	64
50 breast	10+U	65	66
50 free	8+U	67	68
50 free	10+U	69	70

<u>Saturday PM</u>		G	B
100 back	Open	33	34
200 free relay	Open	35	36
200 breast	Open	37	38
50 back	Open	39	40
100 fly	Open	41	42
50 breast	Open	43	44
100 free	Open	45	46

<u>Sunday PM</u>			
200 fly	Open	71	72
200 medley relay	Open	73	74
100 breast	Open	75	76
50 free	Open	77	78
200 back	Open	79	80
50 fly	Open	81	82
200 IM	Open	83	84

- Open events scored + awarded 11, 12, 13, 14, 15+O – 10+U's may swim in Open events, but will not be scored or awarded
- 8+U events will be scored and awarded 6+U, 7, 8
- 10+U events will be scored 9, 10
- 10+U events will be awarded 6+U, 7, 8, 9, 10

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WAIVER AND ENTRY FORM

In consideration of the acceptance of this entry form, I/we hereby, for myself/ourselves, my/theirs, administrators assigns, waive and release any and all claims against United States Swimming (USA), Wisconsin Swimming Inc., Oshkosh Community YMCA and the Oshkosh YMCA Parent's Group and their staffs for injuries incurred by me/us at the meet or while traveling to and from the meet. I/we are bona-fide eligible USA swimmers and eligible to compete in all events I/we have entered.

CLUB NAME: _____ **CLUB ALPHA CODE:** _____

Signature of club official, parent/guardian, coach: _____

Mailing address for final results:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name and phone number of person to contact regarding this entry form:

Name: _____ Phone: _____

Email Address _____

ENTRY RECAP:

Number of total Individual Events: _____ X **\$4.25 ea.** = \$ _____

Number of Relay Entries: _____ X **\$16.00 ea.** = \$ _____

Number of Individual Swimmers _____ X **\$3.00 ea** = \$ _____

Total Entry Fee: Check # _____ \$ _____

Checks payable to: **Oshkosh YMCA Swim Team** Entries due by **Wednesday, November 4, 2009**

Mail to: Jay Coleman
 3303 W. 20th Ave
 Oshkosh, WI 54904
 920-230-8439 x124

Email: jaycoleman@oshkoshymca.org

