

**WISCONSIN MASTERS SWIMMING CHAMPIONSHIPS
SHORT COURSE YARDS
APRIL 4-5, 2009**

SPONSORED BY: The Wisconsin Masters Aquatic Club.

SANCTIONED BY: Wisconsin LMSC for USMS, Inc. Sanction No. 209-005.

LOCATION: Middleton/Cross Plains Area High School
2100 Bristol Street
Middleton, WI 53562

TIME: Saturday April 4 and Sunday April 5, 2009.
Warm-up 10:00 AM, meet starts at 11:00AM.

FACILITIES: 8 lane, 25 yard pool with anti-turbulent lane guides, starting blocks and backstroke flags.

ELIGIBILITY: Open to all Masters Swimmers 18 years old or older. All entrants must be a registered Masters Swimmer and the USMS number must be on the entry. Each entry must be accompanied by a copy of the swimmers 2009 USMS registration card.

RULES: Official Masters Rules will govern this meet. All events will be timed finals.

SEEDING: Heats will be seeded slowest to fastest. Please submit a reasonably accurate seed time, a NO TIME will be seeded in the slowest heat. Entries for the 1650 Freestyle will not be accepted without a seed time which, at the discretion of the meet director, may be subject to change based on prior performances. Age groups and sexes will be combined to expedite the meet.

Heat sheets will be provided.

TIMING: Automatic timing system backed up by watches.

WARM-UP PROCEDURE: Lane 1 will be a start and sprint lane with swimming in one direction only and exiting to the side or end. Lanes 2-8 will be for circle swimming only. NO DIVING STARTS from the blocks or the deck in lanes 2-8. Swimmers must enter the pool feet first in a cautious manner in lanes 2-8. Hand paddles, kickboards, fins, etc., may not be used at any time during the warm up

ENTRY FEE: \$3.00/individual event plus a \$10.00 pool user surcharge. DECK ENTRIES FOR INDIVIDUAL EVENTS WILL NOT BE ACCEPTED. Fees must accompany entries. CHECKS PAYABLE TO WMAC.

ENTRY LIMIT: Five individual events per day plus relays. **THE 1650FREESTYLE WILL BE LIMITED TO THE FIRST 32 ENTRIES RECEIVED.** Each swimmer entered in the 1650 will be responsible for providing a person to count his/her laps.

ENTRY DEADLINE: Snail mail and email entries will be accepted up to 6:00PM, Tuesday, March 31, 2009.

SEND ENTRIES TO:

John Bauman – MEET DIRECTOR
11917 W Rainbow Ave
West Allis, WI 53214-2166
(414)453-7336 Email: wmacswim@sbcglobal.net

ENTRY FORM: The official entry form must be used, one person per form. The **LIABILITY RELEASE** must be signed without any alterations. Remember to include a copy of your USMS registration card.

AWARDS: Ribbons for 1st to 3rd place.

SCHEDULE OF EVENTS

Saturday, April 4

1. 50yd Freestyle
2. 200yd IM
3. 100yd Backstroke
4. 200yd Mixed Medley Relay
5. 200yd Breaststroke
6. 200yd Freestyle
7. 100yd Butterfly
8. 50yd Breaststroke
9. 200yd Free Relay
10. 400yd Medley Relay*
11. 800yd Free Relay*
12. 500yd Freestyle

Sunday, April 5

13. 50yd Butterfly
14. 400yd IM
15. 100yd Freestyle
16. 200yd Mixed Free Relay
17. 200yd Backstroke
18. 100yd Breaststroke
19. 100yd IM
20. 200yd Butterfly
21. 50yd Backstroke
22. 200yd Medley Relay
23. 400yd Free Relay*
24. 1650yd Freestyle

Submit relay entries at the meet.

***Swimmers will be permitted to swim in only one 200 Free, 200 Medley 400 Free, 400 Medley and 800 Free relay. Relay teams may be all men, all women or mixed. Mixed Relays must consist of 2 men and 2 women.**

Meet results will be posted to the Wisconsin Masters Web site, www.swim-wimasters.org, within 48 hours of the conclusion of the meet.

WISCONSIN MASTERS SWIMMING UNIVERSAL MEET ENTRY FORM

Meet Date _____

Meet Location _____

If a copy of your current registration card is in the box to the right you do not have to complete the personal information below, except for the phone number and E-Mail address

Sec. 202.1.1 F (2) of the USMS rules requires you to submit a copy of your current registration card with each meet entry.

Please place your current membership card here and make copies to be used when entering swimming meets.

Each meet may have different fees, please be guided by the specifics on the meet information page.

NAME _____

MALE _____
FEMALE _____ USMS NO _____

BIRTH DATE _____ AGE _____

TEAM _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

E-MAIL ADDRESS _____

USMS rules limit a swimmer to no more than five individual events per day.

EVT #	EVENT	SEED TIME		EVT #	EVENT	SEED TIME
_____	_____	_____		_____	_____	_____
_____	_____	_____		_____	_____	_____
_____	_____	_____		_____	_____	_____
_____	_____	_____		_____	_____	_____
_____	_____	_____		_____	_____	_____
_____	_____	_____		_____	_____	_____

FEES PER MEET INFORMATION PAGE:

_____ EVENTS @ \$_____ ea. + pool surcharge \$_____ = \$_____

LIABILITY RELEASE

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all of the risks inherent in Masters Swimming (training and competition) including possible permanent disability or death, and agree to assume all of those risks.

AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS.

Signed _____ Date _____