



TYR BOONVILLE DOLPHIN OUTSIDE SMOKE INVITATIONAL OCTOBER 25-27, 2019

SANCTION:	This meet will be sanctioned by USA Swimming and Indiana swimming. Sanction #IN20046
HOST:	Boonville Aquatic Dolphins, P.O. Box 714 Boonville, IN 47601
LOCATION:	Boonville High School, 300 N. First St, Boonville, IN 47601
FACILITY:	Six lane, 25 yard pool with non-turbulent lane lines. Starting end depth is 12' and turning end is 4 feet deep. We will be using electronic timing with stopwatch back-up times. Spectator seating is available on the elevated observation deck. NO SMOKING is allowed in the building and/or on the premises.
MEET FORMAT:	This is an open invitational timed finals meet. There will be one session daily for ALL age groups to encourage team unity. In keeping with our outside smoke theme, heats will be seeded backwards, with the fastest entry times in each heat in the outside lanes.
POOL:	The length of the competition course is in compliance and on file with USMS in accordance with articles 105.1.7 and 107.2.1, but as a bulkhead course, is subject to length confirmation. Eligibility of times for USMS Top 10 and Records will be contingent on verification of bulkhead placement.
ELIGIBILITY	: Swimmers must be registered with USA Swimming. Age as of October 25, 2019 will determine age for the entire meet.

RULES: Current USA Swimming Rules, including the Minor Athlete Abuse Prevention Policy ("MAAPP"), will govern this meet. Operation of a drone, or any other flying apparatus, is prohibited over the venue (pools, athlete/coaches area, spectator areas and open-ceiling locker rooms) any time athletes, coaches, officials and/or spectators are present. Exceptions may be granted with prior written approval by the Program Operations Vice Chair. USA Swimming Rules 202.5.2 – At a sanctioned competitive event, USA Swimming athlete members must be under the supervision of a USA Swimming member coach during warm-up, competition, and cool-down. "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. "The Meet Director or Meet Referee shall assist the athlete in making arrangements for such supervision. Coaches and Officials must be registered with USA Swimming in order to be on the pool deck in this capacity and must constantly display their coach or official credentials. Access to the pool deck will be limited to coaches, swimmers, and working officials. Use of audio or visual recording devices including cell phone, is not permitted in changing areas, restrooms, or locker rooms. Changing into or out of swimsuits other than in locker rooms or other designated areas is prohibited.

CLERK OF There will be clerk of course for swimmers 10 and under. Coaches are responsible to get their swimmers to the proper lanes for relays.

ENTRY Each swimmer is limited to 5 individual events and 2 relay events per day. If a swimmer is LIMIT: entered in more than the limit of events, the entry will be made by number order of events starting with #1 until the limit is met.

ENTRY Spectator's fee will be charged for 13 and over. \$3 per day or \$8 for all 3 days. Heat sheets will be available at the concession stand for \$1.
\$ 5.00 per individual event
\$ 8.00 per relay
\$ 8.00 per On Deck individual entry
\$ 10.00 per On Deck relay entry
Indiana Swimming Athlete Surcharge, per swimmer, \$ 2.00
Please make checks payable to Boonville Dolphins. Please note this will be a pre-seeded meet and no check-in is required. On Deck entries will be accepted in empty lanes only.

REFUNDS: In any meet sanctioned by Indiana Swimming other than Championship Meets, the host team shall limit the number of swimmers in any one or more events to maintain a reasonable length of the meet. In the event that entries are limited, **the host club must return the entry fees to the club(s) whose swimmers are not allowed to compete in the specific event(s).** Clubs cannot change this refund rule in their meet information

ENTRY Entries will be accepted starting October 8, 2019. Entry deadline will be Oct 17, 2019. We will DEADLINE: extend the deadline if the meet is not full. Please note this is a pre-seeded meet! Email entries are <u>highly</u> encouraged. Any entries with more than 4 swimmers not submitted as a Hy-Tek file will have a \$25 surcharge added.

ENTRY Please send all entries to:

CHAIR: Mike Chapman email: coachchapman@boonvilleaquaticdolphins.com

MEET Rob James

DIRECTOR: (812) 664-9319 email: <u>streamlineorelse@gmail.com</u>

AWARDS: Events will be swum together, but scored according to age. Ribbons will be awarded for 1st thru 8th place.
For relays, ribbons will be awarded 1st thru 3rd place. Relays will only be scored toward team scores only.
Individual High Point: First place high point will be given for each age group, boys and girls. Age Groups: 6 & under, 7-8, 9-10, 11-12, 13-14, and 15 & over.
Team Trophies: Team trophies will be given for 1st, 2nd, and 3rd places. (B.A.D. is not eligible for a team trophy.)

CONCESSIONS: A wide variety of concession items, including smoked meat, will be available. No food or drink is allowed in the pool area. Heat sheets will be available for \$1.

HOSPITALITY ROOM: The Boonville Aquatic Dolphin swim team is very grateful to all Officials who are able to help officiate our meet. A hospitality room will be furnished for all working Officials and Coaches.

FINAL Each team shall receive a Hy-Tek file of meet results on disk or by email. Individuals may RESULTS: purchase final results for \$5.00.

- SIGN-IN: Swimmers will <u>not</u> be required to sign-in, as this is a pre-seeded meet.
- BEHAVIOR: The Boonville Aquatic Dolphin Swim Team is very grateful to the Warrick County School Corporation for the use of the pool and high school facilities. Please help to keep the pool area clean and pick up your trash. We reserve the right to expel for the remainder of the meet, with no refunds, any swimmer or other person attending this meet who is caught being excessively rowdy, destructive, or in any unauthorized areas. **Coaches and parents are expected to keep their swimmers under control at all times.** It is recommended that swimmers leave all valuables with an adult. No responsibility for lost or stolen articles will be assumed by BAD or the Warrick County School Corporation, except to provide a lost and found, which will be located near the concession area.

EFFECTIVE (OCTOBER 1, 2009) USA Swimming Swim Suit Rule (102.9.1 B)

In swimming competitions, the competitor must wear only one swimsuit in one or two pieces except as provided in 205.10.1. All swimsuits shall be made from textile materials. For men, the swimsuit shall not extend above the navel nor below the knees, and for women, shall not cover the neck, extend past the shoulder, nor extend below the knee.

EFFECTIVE MAY 1, 2010 USA Swimming requires that Pool Certification be included in meet entry letters.

The competition course has not been certified in accordance with 104.2.2C(4).

ALL SWIMMERS AND PARENTS of the BOONVILLE AQUATIC DOLPHINS GREATLY APPRECIATE ALL TIMERS AND OFFICIALS FROM EACH TEAM WHO HELP MAKE OUR MEET RUN SMOOTHLY

SMOKING IS NOT ALLOWED in any area of BOONVILLE HIGH SCHOOL

	Friday PM Session- October 25, 2019		
Warm-up 5:00 pm Girls	Events	Start 6:00 pm Boys	
1	10 AND UNDER 200 Free	2	
3	11-12 200 FREE	4	
5	OPEN 500 FREE	6	
7	10 AND UNDER 200 IM	8	
9	11-12 200 IM	10	
11	OPEN 400 IM	12	

8 and under events will be scored as 7-8 and 6 and under 10 and under events will be scored as 7-8, 9-10 and 6 and under Open events will be scored as 13-14 and 15 and over

	Saturday AM Session- October 20, 2017	~ ~ ~ ~ ~
Warm-up 8:00 am		Start 9:00 am
Girls	Events	Boys
13	8 AND UNDER 100 IM	14
15	13 AND OVER 200 FREE	16
17	11-12 50 FREE	18
19	9-10 50 FREE	20
21	8 AND UNDER 50 FREE	22
23	OPEN 100 BACK	24
25	11-12 100 BACK	26
27	9-10 100 BACK	28
29	8 AND UNDER 25 BACK	30
31	OPEN 200 BREAST	32
33	11-12 50 BREAST	34
35	10 AND UNDER 50 BREAST	36
37	OPEN 200 FLY	38
39	11-12 100 FLY	40
41	9-10 100 FLY	42
43	8 AND UNDER 25 FLY	44
45	OPEN 50 FREE	46
47	12 AND UNDER 200 FREE RELAY	48
49	OPEN 200 FREE REALY	50
51	10 AND UNDER 100 FREE RELAY	52

Saturday AM Session- October 26, 2019

8 and under events will be scored as 7-8 and 6 and under 10 and under events will be scored as 7-8, 9-10 and 6 and under Open events will be scored as 13-14 and 15 and over Warm-up 8:00 AM

Start 9:00 AM

GIRLS	EVENTS	BOYS
53	OPEN 100 FREE	54
55	11-12 100 FREE	56
57	10 AND UNDER 100 FREE	58
59	OPEN 200 BACK	60
61	11-12 50 BACK	62
63	10 AND UNDER 50 BACK	64
65	OPEN 100 BREAST	66
67	11-12 100 BREAST	68
69	9-10 100 BREAST	70
71	8 AND UNDER 25 BREAST	72
73	OPEN 100 FLY	74
75	11-12 50 FLY	76
77	10 AND UNDER 50 FLY	78
79	13 AND OVER 200 IM	80
81	8 AND UNDER 25 FREE	82
83	OPEN 200 MEDLEY RELAY	84
85	12 AND UNDER 200 MEDLEY RELAY	86
87	10 AND UNDER 100 MEDLEY RELAY	88

8 and under events will be scored as 7-8 and 6 and under 10 and under events will be scored as 7-8, 9-10 and 6 and under Open events will be scored as 13-14 and 15 and over

SUMMARY OF ENTRIES

Please supply the information requested below and mail with your entry form and check to Entry Chairperson. Make checks payable to Boonville Aquatic Dolphins

Club Name:	Code:
Number of swimmers entered: Boys _	Girls = Total:
Indiana Swimming Athlete Surcharge,	\$ 2.00 per swimmer: Total:
Number of Boy's Entries:	X \$5.00 each = \$
Number of Girl's Entries:	X 5.00 each = \$
Total Number of Relay Entries:	X \$ 8.00 each = \$
TOTAL	AMOUNT ENCLOSED: \$
Club Official Submitting Entry	Coaches' Names:
Name:	
In consideration of your acceptance of	this entry, I, intending to be legally bound, do he

In consideration of your acceptance of this entry, I, intending to be legally bound, do hereby for myself, my heirs, executors, and administrators, waive and release any and all claims for damages we may have against USA Swimming, Inc., Indiana Swimming, Inc., Warrick County School Corp, Boonville Aquatic Dolphins, their representatives, successors and assignees for any and all injuries to us at said meet.

Authorized Club Signature: _____

Your may have one designated spokesperson for your team to talk to the referee or Clerk of Course. The coach would be the logical person.

Please list the name of	f your spokesperson:		
Did you include:	Entry sheet	Completed form _	Summary of entries

RESULTS:

Please check how you would like to receive your results
____ Hard Copy ____ Meet Manager Backup
___ Team Manager ____ All of the above
Email address to which above should be sent: ______



PARTICIPANT WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

- 1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
- 2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
- 3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
- 4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys' fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
- 5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

Last Name	First Name	MI	Sex (circle)	Date of Birth (mm/dd/yy)
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Street Address, City, State, Zip				
Signature of Participant			Date	Signed
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