



**Mississippi Swimming, Inc.
Northwest Delta Tri-Meet
October 4th, 2008**

- Sanction:** Held under the sanction of United States Swimming and Mississippi Swimming, Inc. **Sanction Number:** pending
- Sponsor:** [Delta Aquatic Club](#) www.deltaducks.org
[Meet Page](#) TBA
- Location:** Delta State Aquatic Center
Delta State University – (Leflore Avenue)
Cleveland, MS 38733
662.846.4730
- Facilities:** Indoor 50 meter by 25 yard competition pool. The short course venue for this meet will include 8 lanes (9ft wide), 6” Competitor lane lines, 7’ minimum depth, with 1 moveable Stark Bulkhead. The timing will be run on Colorado Time System Myriad Full Matrix LED scoreboard with Hy-Tek Meet Manager. Equipment includes paragon Track start competitor starting blocks with electronic relay takeoff equipment. Building is designed with 800 permanent seats and temporary tip and roll bleachers for 600. Continuous warm down area is available. **There will be no smoking or alcohol around the pool, deck, patio, or anywhere swimmers are present. Swimmers only allowed on pool deck.**
- Rules:** Current United States swimming Rules will govern the conduct of the meet.
- Eligibility:** The meet is open to USS registered swimmers only representing the Delta Aquatic Club, Desoto YMCA Swim Club, and Tunica Dolphins. The person responsible for entering an unregistered swimmer as registered will be subject to a fine of up to \$100 per event. Swimmers without USS registration numbers will be rejected. Age of the Swimmer as of **October 4th, 2008**, will determine the age for the duration of the meet.
- Coaches:** Coaches must be current USS Coach Members in order to perform on deck duties. If a coach is not currently certified, he/she may observe as any observer, but may not perform coaching duties or sit in the coach’s area. Coaches’ packet will be given only to those coaches presenting credentials.
- Seeding:** Seeding will be according to Article 102.5 of USS Rules and Regulations.
- Conduct of Meet:** All events will be conducted in short course yards and will swim as timed finals.
- Event Limit:** Swimmers may enter up to (5) individual events and one relay.
- Schedule:** Saturday Afternoon
Warm-ups: 3:00pm
Meet Starts: 4:00pm

4 Hour Rule: If an age group event is swum after the session has been running for four hours, each individual swimmer has the option of either swimming that event or receiving a refund for the that event. A swimmer desiring a refund for that event must declare his/her intent to the Meet Director before the event is swum. There will be no refunds for swimmers not in attendance.

Entry Fees & Deadlines: \$3.00 per swimmer for MSI surcharge
\$3.00 per individual event
\$8.00 per relay

Make all checks payable to DAC.
Mail checks with entries, recap sheet, and signed release form to:

Dan'l Murray
Delta Aquatic Club
PO Box 3286
Cleveland, MS 38733
Phone: 662.588.3263
Fax: 1.662.846.4719
Email: deltacoachdanl@yahoo.com

If you are sending entries via USPO, FEDEX or UPS please WAVE SIGNATURE.

Entry Deadlines: **Entry Deadline is Tuesday, September 30th, 2008.** Entry form included. If available please use Hy-Tek. Use a 3 ½" disk, and send hard copies for verification. Complete entries should include swimmer's first and last name, age, events, entry time **in yards**, and USS number. Prefer Emailed entry file using Hy-Tek.

Late entries will be accepted when lanes are available but will be charged double entry fee. No swimmer may scratch one event and enter another. Late entries are due by the beginning of the meet.

Bathroom Policy: **Absolutely NO cell phones or camera's** are allowed in the boys and girls bathrooms in the Aquatic Center or in the surrounding bathrooms in DSU buildings.

Timers: Each participating team will be assigned timing assignments according to the size of the team.

Officiating: DAC would greatly appreciate help from visiting teams. Please contact the Meet Director if you have officials that can help. As a matter of USA Swimming insurance coverage, official's certification card must be carried on person. We also ask for a list of officials willing to work for any session.

Warm-Ups: Mississippi Swimming Safety Guidelines and Warm-up Procedures will be in effect at this meet. The first 30 minutes will be general warm-ups, NO Diving. In the last 20 minutes, the two outside lanes will be for pace, all swimmers leaving the wall from a push. Lanes 2 and 7 are for dives off the blocks with one way traffic. The remaining lanes are for general warm-up, NO DIVING.

Scoring: Individual Events: 9, 7, 6, 5, 4, 3, 2, 1
Relays: Double points

Awards: Ribbons 1st – 8th for events with 12 and younger athletes.

- Reporting:** Swimmers in all events will report directly to the starting blocks. It is the responsibility of the swimmer and the coach to see that the swimmer reports to the assigned lane at the proper time. There will be no clerk of course.
- Hospitality:** Basic hospitality will be located on deck. It is available to all coaches and meet officials.
- Concessions:** Basic Concessions will be available from the vending machines in the hallways.
- Heat Sheets:** Will be available for \$3.
- Meet Referee:** Karen Mayers
606 Frederick Drive
Cleveland, MS 38732
Home 662.846.1373
- Meet Director:** Kevin Cox
P.O. Box 780
Cleveland, MS 38732
Home 662.843.1666
Cell 662.719.6074
Work 662.843.4091 ext.11
Email: kwc514@yahoo.com
- DAC Coach:** Dan'l Murray
Delta State University - Delta Aquatic Club
PO Box 3286
Cleveland, MS, 38733
Cell 662.588.3263
Work 662.846.4730
Email: deltacoachdanl@yahoo.com

| Women | Event Order | Men |
|--------------|----------------------------------|------------|
| 1 | 8 & Under 100 Freestyle Relay | 2 |
| 3 | 10 & Under 100 Freestyle Relay | 4 |
| 5 | 11 & Over 200 Freestyle Relay | 6 |
| 7 | 6 & Under 25 Freestyle | 8 |
| 9 | 8 & Under 25 Freestyle | 10 |
| 11 | 10 & Under 50 Freestyle | 12 |
| 13 | 11 - 12 50 Freestyle | 14 |
| 15 | 13 & Over 50 Freestyle | 16 |
| 17 | 6 & Under 25 Butterfly | 18 |
| 19 | 8 & Under 25 Butterfly | 20 |
| 21 | 10 & Under 50 Butterfly | 22 |
| 23 | 11 - 12 50 Butterfly | 24 |
| 25 | 13 & Over 50 Butterfly | 26 |
| 27 | 13 & Over 100 Butterfly | 28 |
| 29 | 6 & Under 25 Backstroke | 30 |
| 31 | 8 & Under 25 Backstroke | 32 |
| 33 | 10 & Under 50 Backstroke | 34 |
| 35 | 11 - 12 50 Backstroke | 36 |
| 37 | 13 & Over 50 Backstroke | 38 |
| 39 | 13 & Over 100 Backstroke | 40 |
| 41 | 6 & Under 50 Freestyle | 42 |
| 43 | 8 & Under 50 Freestyle | 44 |
| 45 | 10 & Under 100 Freestyle | 46 |
| 47 | 11 - 12 100 Freestyle | 48 |
| 49 | 13 & Over 100 Freestyle | 50 |
| 51 | 6 & Under 25 Breaststroke | 52 |
| 53 | 8 & Under 25 Breaststroke | 54 |
| 55 | 10 & Under 50 Breaststroke | 56 |
| 57 | 11 - 12 50 Breaststroke | 58 |
| 59 | 13 & Over 50 Breaststroke | 60 |
| 61 | 13 & Over 100 Breaststroke | 62 |
| 63 | 8 & Under 100 Individual Medley | 64 |
| 65 | 10 & Under 100 Individual Medley | 66 |
| 67 | 11 - 12 100 Individual Medley | 68 |
| 69 | 13 & Over 200 Individual Medley | 70 |

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TEAM ENTRY SUMMARY SHEET

Club Name: _____ Club Code: _____

Names of Attending Coaches: _____

Number of Swimmers (MSI Surcharge) _____ @ \$3.00 = _____

Number Individual Entries _____ @ \$3.00 = _____

Number of Relay Entries _____ @ \$8.00 = _____

Total Entry Fees = _____

Team Address: _____

Phone: _____

In consideration of the acceptance of this entry, we hereby waive and relieve any and all claims against USS, MSI, DAC, DSU, and meet officials.

Signature of the coach or club representative: _____

Please send entries to: Coach Dan'l Murray
Delta State University - Delta Aquatic Club
deltacoachdanl@yahoo.com
PO Box 3286
Cleveland, MS 38733

Please make all checks payable to DAC

INFORMATION FORM FOR DISABLED SWIMMERS

NAME _____

ADDRESS _____

AGE _____ BIRTHDATE ____/____/____.

EVENTS TO BE SWUM ____/____/____/____/____/____/____/____

TYPE OF DISABILITY

Blind _____ Mentally Retarded _____ Deaf _____ Physical _____

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:

TYPE OF MEDICATION _____

PURPOSE OF MEDICATION _____

PARENT'S OR GUARDIAN'S NAME _____

PARENT'S OR GUARDIAN'S SIGNATURE _____

ATHLETES'S SIGNATURE _____

PHYSICIAN'S NAME

(please print) _____

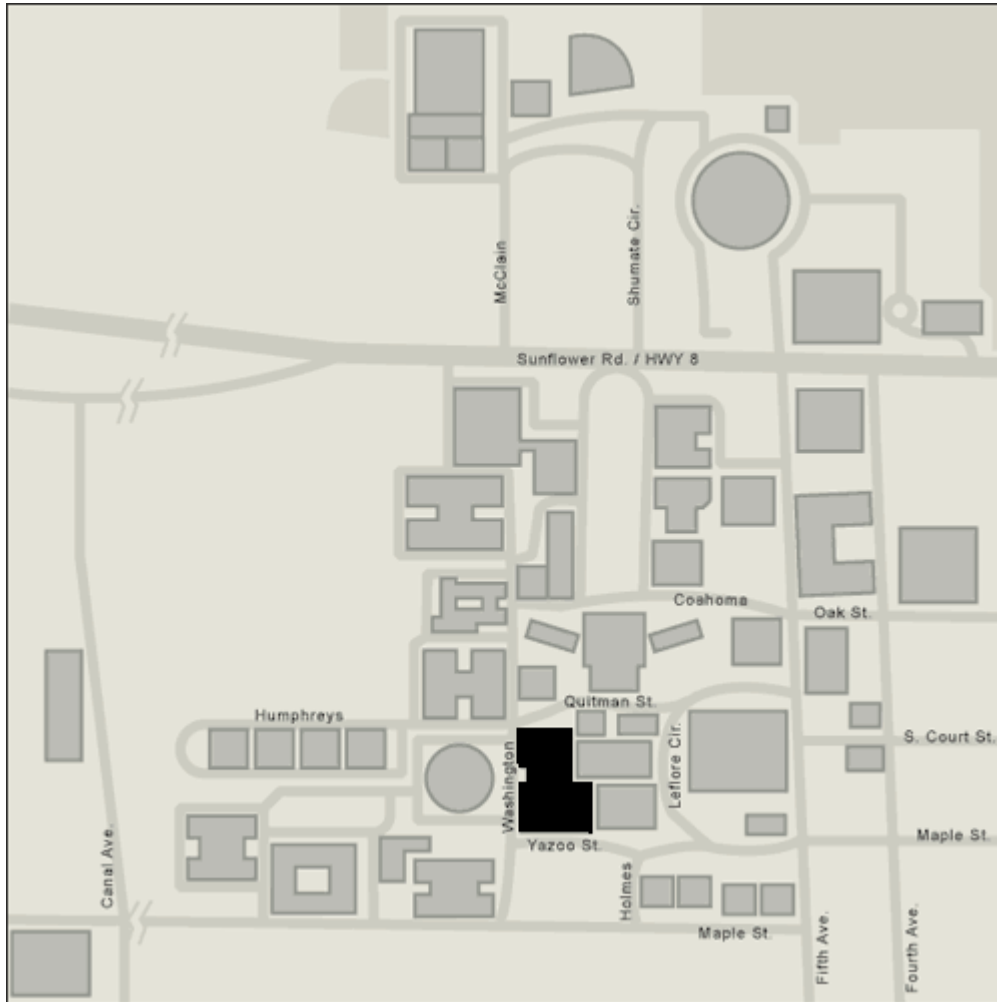
PHYSICIAN'S ADDRESS _____

PHYSICIAN'S PHONE NUMBER _____

I have examined the above Entrant and, in my opinion, there is no mental or physical reason why he or she should not participate in USA Swimming competition.

Physician's signature Date

Directions to the Pool – Delta State University Map



* Aquatic Center is darkened

- If traveling onto Highway 8, turn at the stoplight on Fifth Ave.
- Take 5th Ave to stop sign, take your first (Right) at stop sign.
- Take Leflore towards Campus (Right) the Aquatic Center and you will see the parking lot across from the pool.