

# 2009 KATS WINTER INVITATIONAL MEET

## JANUARY 16-18, 2009

Approval Number 0733

The Kalispell Aquatic Team takes pleasure in inviting you to our KATS Winter Invitational Meet. The meet will be held at the Summit Fitness Center located at 205 Sunnyview Lane off HWY 93 North, near the hospital in Kalispell, Montana. Please use the North Entrance as everyone needs to check in and that entrance leads to the front desk.

**ELIGIBILITY:** All coaches coaching and swimmers competing for a USA Swimming or Swim Canada registered team must have a current 2009 USA Swimming or the FINA equivalent registration card. Masters swimmers are welcome and encouraged to compete at this meet, but do not have to belong to USAS or the FINA equivalent. Age group shall be determined by the swimmer's age on the first day of the meet. No swimmer shall swim outside of the correct age group.

**FACILITY:** The Summit is a state-of-the-art private fitness center. The pool is a regulation 25-yard six lane pool with non-turbulent lane dividers. There is room on the pool deck and upper level for spectators with access to a comfortable and spacious eating area. A conference room will be provided for swimmers and families to "set up camp".

**SANCTION AND RULES:** This meet is approved by USA Swimming and Montana Swimming. The 2008-2009 USA Swimming and Montana Swimming rules shall govern the meet. Timing will be by Colorado Timing System with backup timers or manual times. All events will be timed finals.

**SAFETY:** Montana Swimming warm-up and safety guidelines will be in effect for the duration of the meet. Each coach is responsible for informing the swimmers of the provisions of the safety code before attending the meet. A safety marshal will be on deck during the meet. No diving in the shallow end of the pool.

**ENTRIES:** Each swimmer may swim a maximum of four (4) individual events and one (1) relay per day. Swimmers will be seeded on the basis of their submitted times. Entrants shall submit their fastest officially recorded times in either yards or converted meters. "No time" entries will be accepted. Please include relay names with your entries. 8 & under swimmers may choose 8&U events and 10&U event.

The 1650 will be swum combined, fastest to slowest. Positive check in is required for the 1650 by 5:45 p.m., Friday. The 1650 freestyle will be deck seeded after positive check in. Swimmers in the 1650 freestyle must provide timers and counters. The 500 freestyle will be swum alternating girls and boys, fastest to slowest. All 25-yard events will start from the blocks. There will be no deck seeding except for the 1650 freestyle.

Entries should be submitted as follows:

- 1) E-mail entries to Alice at [katsswimteam@yahoo.com](mailto:katsswimteam@yahoo.com) using Hy-Tek software file and attach a team entry report (in word or rich text format) from Team Manager.
- 2) Master Entry form may be used if there is no access to Hy-Tek software.

**ENTRY DEADLINE:** Entries, completed paperwork, and entry fees must be received by **Sunday, January 11, 2009.**

Mail entries to: KATS  
PO Box 11,  
Kalispell, MT 59903.

E-mail and phone entries for individuals only will be accepted through 7:00 p.m. January 12th by calling Alice at (406) 756-8214 or by e-mailing her at [katsswimteam@yahoo.com](mailto:katsswimteam@yahoo.com).

**FEES:** Entry fees are \$10.00 surcharge per swimmer and \$2.00 for each event, with \$5.00 per relay team. Please make checks payable to KATS. There will be no refunds.

**SCRATCHES:** Swimmers will be scratched at the blocks. Swimmers and their coaches are responsible for the swimmers being at the starting blocks before the start of their race.

**SCORING:** Individual scoring will be as follows: 20-17-16-15-14-13-12-11-9-7-6-5-4-3-2-1

**AWARDS:** Ribbons will be awarded to the top 16 places in individual events in the following girl and boy age groups: 8&U, 9-10, 11-12, 13-14, 15-19. High Point Awards will be given to the top three swimmers in the age groups listed above. Relays will be awarded first through fourth place in the 10 & under, 11-12, and 13 & over age groups. A club representative should pick up the awards following the conclusion of the meet.

**RESULTS:** Meet results will be posted on the Montana Swimming web site <http://montana.usswim.net> and on <http://swimconnection.com/mt>

**STARTING TIMES:** Open warm-up shall begin on Friday at 5:30 p.m. for the 1650. Racing will start at 6:15 p.m. On Saturday and Sunday warm-ups will begin at 7:45 a.m., with the first events starting at 9:00 a.m. KATS will have first warm-ups both days. There will be officials meetings Friday at 5:40 p.m., Saturday and Sunday at 8:10 a.m. Coaches meeting will be immediately after the conclusion of warm ups both Saturday and Sunday.

**OFFICIALS:** The help of all US Certified Officials would be greatly appreciated.

**CONACTS:**  
Meet Manager – Alice Judd (406) 756-8214  
Meet Referee—Susan Hucceby (406) 723-4800  
Meet Registrar – Alice Judd (406) 756-8214  
Meet Safety Marshal – Mark Walters

**CONCESSIONS:** Concessions will be available each day.

**THE SUMMIT:** The Summit is a private club with rules for all swimmers to follow. Please note especially that no one under the ages of 13 is allowed in the adult locker rooms. There are boys' and girls' locker rooms and family locker rooms available. We ask that the hot tub not be used until the end of each day. There will be no eating allowed in the pool area or on the lower level of the Summit. Beverages will be allowed on the pool deck in plastic or paper containers, absolutely no glass will be allowed.

Since this is a private club, only members are allowed to use the facilities. The Summit will offer a ½ price daily use fee of \$6.00 for visiting adults who would like to have a workout during the meet.

**MOTELS AVAILABLE FOR MEET:**

|              |                |
|--------------|----------------|
| La Quinta    | 1-800-531-5900 |
| Days Inn     | 1-800-329-7466 |
| Four Seasons | 1-800545-6399  |
| Super 8      | 1-406-755-1888 |
| Hampton Inn  | 1-800-427-7866 |
| Aero Inn     | 1-800-843-6114 |
| Outlaw Inn   | 1-800-237-6100 |

We look forward to seeing you at our 2009 KATS Winter Invitational Meet.

## KATS 2009 Winter Invitational

### FRIDAY

1 Mixed 11 & Over 1650 Freestyle

### SATURDAY'S EVENTS

#### GIRLS

#### BOYS

|    |                                |    |
|----|--------------------------------|----|
| 2  | 11 & Over 500 Freestyle        | 3  |
| 4  | Open 100 IM                    | 5  |
| 6  | Open 100 Butterfly             | 7  |
| 8  | 8 & Under 25 Backstroke        | 9  |
| 10 | 11 & Over 200 Backstroke       | 11 |
| 12 | Open 50 Breaststroke           | 13 |
| 14 | Open 100 Freestyle             | 15 |
| 16 | Open 50 Backstroke             | 17 |
| 18 | 8 & Under 25 Breaststroke      | 19 |
| 20 | 11 & Over 200 Breaststroke     | 21 |
| 22 | 11 & Over 400 IM               | 23 |
| 24 | 10 & Under 200 Freestyle Relay | 25 |
| 26 | 11-12 200 Freestyle Relay      | 27 |
| 28 | 13 & Over 400 Freestyle Relay  | 29 |

### SUNDAY'S EVENTS

#### GIRLS

#### BOYS

|    |                             |    |
|----|-----------------------------|----|
| 30 | 10 & Under 200 Medley Relay | 31 |
| 32 | 11-12 200 Medley Relay      | 33 |
| 34 | 13 & Over 200 Medley Relay  | 35 |
| 36 | 11 & Over 200 IM            | 37 |
| 38 | 8 & Under 25 Freestyle      | 39 |
| 40 | 11 & Over 200 Freestyle     | 41 |
| 42 | Open 50 Butterfly           | 43 |
| 44 | Open 100 Backstroke         | 45 |
| 46 | Open 100 Breaststroke       | 47 |
| 48 | Open 50 Freestyle           | 49 |
| 50 | 8 & Under 25 Butterfly      | 51 |
| 52 | 11 & Over 200 Butterfly     | 53 |

**2009 KATS Winter Invitational Swim Meet**  
Entry Summary, Waiver, and Registration Confirmation

Team Name \_\_\_\_\_ Team Abbreviation: \_\_\_\_\_

\_\_\_\_\_ Total # of swimmers at \$10.00 \_\_\_\_\_

\_\_\_\_\_ Total number of entries at \$2.00 \_\_\_\_\_

\_\_\_\_\_ Total # of relays at \$5.00 \_\_\_\_\_

Grand Total                      \$\$ \_\_\_\_\_

**Waiver and Montana Swimming -- USA Registration Confirmation**

In consideration of the acceptance of this entry, I/we the undersigned parent, guardian or coach, or individual adult swimmer, hereby, for ourselves, our heirs, administrators, assigns, release and forever discharge any and all rights and claims for damages I/we have against the Kalispell Aquatic Swim Team, the KATS Winter Invitational Swim Meet, The Summit Fitness Center, Montana Swimming, USA Swimming, their agents, representatives, successors or assigns for any or all injuries arising of our travel to and from, or participating in said meet. It is agreed that the team (or individual swimmer not a member of a team) shall be responsible for any damages caused to facilities or equipment by any members of the team.

We hereby submit our team's entry sheets and fees for your upcoming meet and verify that the below named coaches will be in attendance. These coaches are current in all the requirements set forth by United States Swimming including certification in Red Cross Safety Training for Swim Coaches or Lifeguard Training, First Aid, and CPR.

Coach's Name \_\_\_\_\_

Coach's Name \_\_\_\_\_

Coach's Name \_\_\_\_\_

We further verify that all our entered swimmers who compete as a member of a USAS or Swim Canada registered team are registered athlete members of USAS or the FINA equivalent for the current year. Masters swimmers may also compete at this meet and do not have to be members of USAS or the FINA equivalent.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name \_\_\_\_\_

Club Position  
Or Title \_\_\_\_\_

E-mail address of team representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**It is very important that the above information is completed and this form returned with your entries.**

Meet Name:        2008 KATS Winter Invitational  
Meet Date:        January 16-18,2009  
Location:         Summit Fitness Center, Kalispell, MT  
Host Team:        Kalispell Aquatic Swim Team

### MASTER ENTRY FORM – 2009 KATS Winter Invitational Swim Meet

Name: \_\_\_\_\_ Date: January 16-18, 2009 Team Abbreviation: \_\_\_\_\_  
 Club: \_\_\_\_\_ Coach: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

| Name | Age | Sex | USAS # | Event# | Event# | Event# | Event# | Event# | Event# | Event# | Event# | Fees |
|------|-----|-----|--------|--------|--------|--------|--------|--------|--------|--------|--------|------|
|      |     |     |        | Time   | Time   | Time   | Time   | Time   | Time   | Time   | Time   |      |
|      |     |     |        |        |        |        |        |        |        |        |        |      |
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|      |     |     |        |        |        |        |        |        |        |        |        |      |
|      |     |     |        |        |        |        |        |        |        |        |        |      |

Total Swimmers this sheet: \_\_\_\_\_ x \$10.00 = \_\_\_\_\_  
 Total Events this sheet: \_\_\_\_\_ x \$2.00 = \_\_\_\_\_  
 Total Relays this sheet: \_\_\_\_\_ x \$5.00 = \_\_\_\_\_  
**Total Due this sheet: \_\_\_\_\_**