



JAN & PIEPER NIOLON MEMORIAL SPRINT WITH THE BEST 2016

Biloxi, MS
April 2, 2016



- SANCTION:** Held under the sanction of United States Swimming and Mississippi Swimming, Inc. **Sanction #MSI 1610**
- SPONSORS:** Biloxi Elite Swim Team and City of Biloxi Parks & Recreation Department. Meet Mobile application will be active during the meet.
- LOCATION:** Biloxi Natatorium, 1384 Father Ryan Avenue, Biloxi, MS 39530.
228-435-6205/228-435-6299(fax)
- FACILITY:** Indoor 50 meter by 25-yard pool with an 8-lane, 50 meter competition course with non-turbulent lane lines for long course competition. The pool depth measures 4 feet 0 inches (1.22 meters) from starting end to 13 feet 0 inches (3.96 meters) at the opposite wall. The competition course has been certified in accordance with 104.2.2C (4). The copy of such certification is on file with USA Swimming. Automatic timing will be provided by Colorado Timing System with HYTEK interface and full color display scoreboard. Manual back up will be used. Continuous warm-up/warm-down will be available in the "wash area", the area between the wall and the outside lane's ropes. Meet management has the right to decrease the number of competition lanes if entry numbers permit. If so, an additional continuous warm-up/warm-down area will be added.
- Heat sheets, deck space, patio area, first aid and hospitality will be available. Parking is available at the pool and school next door. **Please do not block driveways or park on the grass.**
- We ask that swimmers, parents, and coaches be thoughtful when using the pool and surrounding areas. There will be no tobacco products or alcohol allowed on the facility grounds.
- Deck changes are prohibited.
- RULES:** Current USA Swimming rules/regulations will govern the conduct of the meet unless otherwise noted herein. Use of audio or visual recording devices, including cell phones, is not permitted in changing areas, rest rooms or locker rooms
- SWIMWEAR:** Swimwear will be according to Article 102.8 of USA Swimming Rules and Regulations.
- ELIGIBILITY:** All participants must be USA Swimming registered athletes. Entries will not be accepted without current registration numbers. A swimmer's age on the first day of the meet will determine his or her age for the entire meet.

COACHES: Coaches must be current USAS Coach Members in order to perform deck duties. If a coach is not currently certified, he/she may observe the meet as any other observer, but may not coach or sit in the coaches' area. There will be a brief Coaches' meeting 15 minutes before competition (if needed).

SUPERVISION: Any swimmer entered in the meet 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. When unaccompanied by a member-coach, it is the responsibility of the swimmer or the swimmer's legal guardian to ensure compliance with this requirement.

SEEDING: Seeding will be done according to Article 102.5 of USAS Rules and Regulations. All times must be entered in LONG COURSE METERS for the meet.

MEET FORMAT: This is a timed finals meet and will be scored as they are swum.

ENTRIES: A Swimmer may swim **four (4) individual** events plus **one (1) relay** per day.

ALL ENTRIES MUST BE RECEIVED NO LATER THAN 11:59 P.M. ON SUNDAY, MARCH 27, 2016.

Please send compatible meet entry file for Hy-tek Meet Manager via email. And fax and/or email the 2016 Sprint with the BEST Team Entry Summary Report Sheet at the end of the invitation. There will be an additional surcharge per athlete (Five dollars, \$5.00) if entries have to be hand entered, in other words if computer entry file is not used.

LATE ENTRIES WILL BE ACCEPTED PRIOR TO THE START OF EACH SESSION ONLY BY A PREVIOUSLY REGISTERED SWIMMER IF LANE SPACE IS AVAILABLE AND WILL BE DOUBLE-CHARGED FOR THE EVENT, FEES MUST ACCOMPANY ENTRY. NO NEW HEATS WILL BE CREATED FOR LATE ENTRIES.

Please note: A person entering an unregistered swimmer will be subject to a fine of \$100 per swimmer. This will be enforced by MSI through their Review Section.

Mail entries to: **Jamie Lee**
1384 Father Ryan Avenue
Biloxi, MS 39530
(228)435-6108 / (228)435-6299 FAX
[**jlee283@cableone.net**](mailto:jlee283@cableone.net)

ENTRY FEE: \$3.00 per individual event
\$8.00 per relay event
\$5.00 MSI surcharge per swimmer (including relay-only swimmers)
\$3.00 Facility Surcharge

\$5.00 additional surcharge per swimmer (if hand entry is required)

Make checks payable to: **Biloxi Elite Swim Team**

ENTRY LIMIT: Entries will be limited to the first 300 swimmers. Additional entries may be accepted by discretion of the meet director.

SCHEDULE: **Saturday morning warm-ups..... 9:00 a.m.**
Competition.....10:15 a.m.

WARM-UPS Warm-ups will follow current MSI guidelines. There will be one fifty (50) minute warm-up period with assigned warm-up areas and one-way diving only. Please be courteous in allowing other swimmers to use your areas' starting blocks. Meet management reserves the right to add an additional warm-up session if needed and to change the timeframe of warm-up duration, ample notification will be given if possible.

SCORING: Individual – 9, 7, 6, 5, 4, 3, 2, 1
Relays – 18, 14, 12, 10, 8, 6, 4, 2

AWARDS: Ribbons: Places 1 – 8
Team Awards: 1st – 3rd

SCRATCHES: No swimmer may enter another event make-up for a missed event.

REPORTING: Swimmers will report directly to the starting blocks.
There will be **NO Clerk of Course**.

LANE ASSIGNMENTS: Lane assignments will be included in the Coaches' Packets as well as posted at both ends of the racing course and the heat sheet. Teams will also be responsible for providing timers for lanes (if needed).

OFFICIALS: Please return the enclosed sheet or let the meet director know the willing workers as soon as possible so that a schedule can be made. Officials' meetings will be at the discretion of the meet referee.

MEET DIRECTOR: Jamie Lee
jlee283@cableone.net

MEET REFEREE: Todd Patterson
toddpatterson@bellsouth.net

MEET MARSHALL: There will be multiple meet marshalls on site with proper identification.

4-HOUR RULE: If an age group event for 12 and under swimmers is swum after the session has been running four (4) hours, each involved swimmer has the option of either swimming the event or receiving a refund for the event. A swimmer desiring a refund must declare his/her intent to the Meet Director. There will be no refunds for swimmers not in attendance.

ADDITIONAL: All relay entries will be entered on the relay entry card by their **full name, last and first**. Any swimmer that is “relay only” must be included on the official recap/hardcopy and pay the swimmer surcharge.

2016 SPRINT WITH THE BEST ORDER OF EVENTS

Session 1

Saturday Morning, April 2, 2016

Warm-up 9:00 AM

Competition 10:15 AM

Girls Event #	Event	Boys Event #
1	10 & Under 200 Freestyle Relay	2
3	11 & Over 200 Freestyle Relay	4
5	10 & Under 50 Freestyle	6
7	11-12 50 Freestyle	8
9	13-14 50 Freestyle	10
11	15 & Over 50 Freestyle	12
13	10 & Under 50 Backstroke	14
15	11-12 50 Backstroke	16
17	13-14 100 Backstroke	18
19	15 & Over 100 Backstroke	20
21	10 & Under 50 Breaststroke	22
23	11-12 50 Breaststroke	24
25	13-14 100 Breaststroke	26
27	15 & Over 100 Breaststroke	28
29	10 & Under 50 Butterfly	30
31	11-12 50 Butterfly	32
33	13-14 100 Butterfly	34
35	15 & Over 100 Butterfly	36
37	10 & Under 100 Freestyle	38
39	11-12 100 Freestyle	40
41	13-14 100 Freestyle	42
43	15 & Over 100 Freestyle	44

2016 Sprint with the BEST Team Entry Summary Report Sheet

Club Name: _____ Club Code: _____

Total number of swimmers _____ x \$8.00 (+\$5.00 if hand entry required) = _____

Total number of individual entries _____ x \$3.00 = _____

Total number of relay entries _____ x \$8.00 = _____

Total Entry Fees \$ _____

Send Official Results to:

Name _____

Address _____

Phone: _____ (cell) _____ (work) _____

Coaches attending the meet and/or Officials attending the meet

Release

On behalf of each of the listed competitors, I understand and agree that USA Swimming, Inc., MSI Inc., Biloxi Elite Swim Team, City of Biloxi, and meet officials shall be free of all liabilities or claims for loss of valuables or damages arising by any reason of injuries to anyone during travel to or from this meet or during the conduct of this meet or during any social gathering associated with this meet and expressly agree to waive as condition of being allowed to enter this meet.

Signed _____ Date _____

(team coach/team representative)

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