

Delaware Swim Team

Presents their

Pumpkin Patch Mini Meet

October 20, 2007

Held under the Sanction of USA Swimming
 Sanctioned by Middle Atlantic Swimming, Inc.
 Sanction # MA 0829 M

MEET DESCRIPTION	BEWARE THE GREAT PUMPKIN! Our Mini Meet for 8 & under swimmers will feature a Halloween theme with each participant receiving a pumpkin award.
LOCATION	McKean High School 310 McKennans Church Rd, Wilmington, DE 19808 Day of meet ONLY emergency phone # 302-995-5135
FACILITIES	A 6 lane, 25 yard indoor pool with electronic timing, judging system, and scoreboard. Depth of the pool at the starting end is 12'. Height of the starting blocks is 29". Seating Capacity: 500 Parking: Large lot adjoining pool facility Refreshments: Snack Bar & Coach/Volunteer hospitality area will be provided.
MEET REFEREE	Kent Steeves 302-465-0118 e-mail: makk4@verizon.net
MEET DIRECTOR	Brian Drysdale may be contacted at: briand@freestyles.org
SAFETY DIRECTOR	Kathy Drysdale 302-652-4378 e-mail: kathyd@freestyles.org
OFFICIALS	Please contact Kathy Drysdale, at kathyd@freestyles.org , if you are able to officiate.
ELIGIBILITY	This meet is open to all 8 & Under swimmers registered with USA Swimming. Swimmer's age is as of October 20, 2007. No proof of time is required as there are no qualifying times. Swimmers may enter a maximum of 5 individual events per day.
ENTRY LIMITATIONS	The Meet Director reserves the right to limit entries, events or heats, or to modify the meet format to conform to Middle Atlantic rules. Swimmers/teams eliminated from the meet due to time or space constraints will be given a full refund or offered alternate event placement.

<p>ORDER OF EVENTS</p> <p>WARM-UP PROCEDURES & START TIMES</p>	<p>See attached sheet listing the order of events and event numbers.</p> <p>Warm-up: no diving off starting blocks or the edge of the pool during this time. Sprint lanes will be available for at least the last 10 minutes of each warm-up session. Swimmers must be under the direct supervision of a currently registered USA Swimming coach at all times. Open warm-ups will prevail unless lane assignments are required at the direction of the Meet Director.</p> <p style="text-align: center;">Warm-up/Start Schedule: Saturday, October 20, 2007</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Warm-Up Time</td> <td style="text-align: center;">Start Time</td> </tr> <tr> <td style="text-align: center;">No earlier than 4:00 PM</td> <td style="text-align: center;">No earlier than 4:30 PM</td> </tr> </table> <p>Any adjustments to this time schedule will be posted on DST's & Middle Atlantic's web sites.</p>	Warm-Up Time	Start Time	No earlier than 4:00 PM	No earlier than 4:30 PM
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No earlier than 4:00 PM	No earlier than 4:30 PM				
<p>DECK ENTRIES</p>	<p>Subject to space availability, and at the discretion of the Meet Director, deck entries will be accepted on the day of the meet, up until 10 minutes prior to the start of each session, at the cost of \$8.00 per individual event, or \$16.00 per relay. Swimmers not previously entered in the meet must provide proof of current USA Swimming registration. Deck-entered swimmers will compete unofficially; the achieved time is official, but will not score in the meet for points or awards. To enter, please see the Meet Director before or during warm-ups.</p>				
<p>SWIMMERS WITHOUT A COACH</p>	<p>Swimmers unaccompanied by a credentialed USA Swimming coach should report to the Meet Director or Meet Referee before the warm-up for each session.</p>				
<p>SEEDING</p>	<p>This is a pre-seeded, timed final mini meet.</p>				
<p>HOW TO ENTER</p>	<p>Entry times are to be submitted in the course in which they were achieved: LCM, SCM, or SCY. Times submitted in a course other than SCY will not be treated as non-conforming times. "NO TIMES" will be accepted.</p> <p>All entries must be submitted manually on the attached DST non-computer entry form (Swimmer's USA Swimming Registration number must be clearly included) OR on a 3 ½ " disk OR by e-mail to kathyd@freestyles.org. If you have Team Manager, please also provide a printout of the meet entries by name.</p> <p>You must complete the DST Meet Summary Form and mail/e-mail with the entry whether you use e-mail, the disk entry or the manual entry form. A club contact person must be listed on the entry summary form, including an e-mail address. A \$5.00 surcharge per swimmer will be imposed on teams that have submitted a non-computer entry with five (5) or more swimmers. This processing fee must be included with your entries.</p>				
<p>ENTRY FEES</p>	<p>\$4.00 PER INDIVIDUAL EVENT \$8.00 PER RELAY</p>				

SEND ENTRIES TO	<p>Delaware Swim Team Booster Club (Make all checks payable to "Delaware Swim Team Boosters") c/o Kathy Drysdale/Meet Entries 2150 New Castle Avenue, New Castle, DE. 19720</p> <p>E-mail entries to kathyd@freestyles.org: Subject: Your team name/Pumpkin Patch Entry</p> <p>Any questions regarding entry forms should be directed to Kathy Drysdale: Phone: 302-652-4378 E-mail: kathyd@freestyles.org Fax: 302-652-5343</p>
ENTRY DEADLINE	Friday, October 5, 2007. No late entries will be accepted.
RULES	<p>This meet will be conducted according to current USA Swimming rules. Middle Atlantic Swimming rules shall also apply. USA swimming / MA swimming safety guidelines and warm-up procedures will be in effect for the entire meet.</p> <p>Only currently credentialed coaches, USA Swimming registered athletes and essential meet personnel will be permitted on deck.</p> <p>This meet will be conducted using the Whistle command supplemented with verbal commands and No-Recall False Start procedures.</p> <p>Penalties will be imposed upon any swimmer when any coach, parent or swimmer enters any time other than the swimmer's best time for any event. Penalties may include fines or suspension.</p>
SCORING & AWARDS	<p>Each participant will receive a special pumpkin award.</p> <p>Additional awards for each event: Medals: 1st through 3rd places Rosettes: 4th through 6th places Ribbons: 7th through 12th</p>
PROGRAMS, ADMISSION, & VOLUNTEERS	<p>\$3.00 Per Session ~ A free program and refreshments will be offered to those volunteering to assist with the operation of the meet by serving as timers, runners, or in any other function as designated by the meet director.</p>
RESULTS	<p>Will be posted on DST's website: www.delawareswimteam.com and the Middle Atlantic website: www.maswim.org</p>
DIRECTIONS	<p>From Philadelphia & NJ – Take I-95 South (follow signs for Baltimore) to Exit 4B: Stanton/Churchman's Cross/Rt7 North...Follow signs for Rt 7 North. Stay in left lanes to continue on Rt7 North (road bends to the left)...Continue on Rt 7 and crossover Rt 2...After about a ½ mile turn right at Mealey's Funeral Home onto McKennan's Church Rd. Go straight through traffic light (crossover Miltown Rd). Go through 2 more traffic lights and once you get to the 3rd light (blinking yellow) turn left into McKean High School. Follow the road (bends to the right) and the pool is in the first building on the right with parking in front of it.</p>
ACCOMODATIONS	<p>Contact Kathy Drysdale at DST 302-652-4378 for referrals</p>

2007 DST Pumpkin Patch Mini Meet

October 20, 2007

Warm-up: No Earlier Than 4:00 pm

Start: No Earlier Than 4:30 p.m.

Girls				Boys
1	200 Free Relay	8 & Under	200 Free Relay	2
		5 minute break		
3	25 Free	8 Year Olds	25 Free	4
5	25 Free	7 Year Olds	25 Free	6
7	25 Free	6 Year Olds	25 Free	8
9	25 Free	5 & Under	25 Free	10
11	50 Free	8 & Under	50 Free	12
13	25 Back	8 Year Olds	25 Back	14
15	25 Back	7 Year Olds	25 Back	16
17	25 Back	6 Year Olds	25 Back	18
19	25 Back	5 & Under	25 Back	20
21	50 Back	8 & Under	50 Back	22
23	100 IM	8 & under	100 IM	24
		10 minute break		
25	25 Breast	7/8 Year Old	25 Breast	26
27	25 Breast	6 & Under	25 Breast	28
29	50 Breast	8 & Under	50 Breast	30
31	25 Fly	7/8 Year Old	25 Fly	32
33	25 Fly	6 & Under	25 Fly	34
35	50 Fly	8 & Under	50 Fly	36

**DELAWARE SWIM TEAM'S
PUMPKIN PATCH MINI MEET**

October 20, 2007

Meet Summary Form ~ This Form Must Accompany All Entries

Team Name _____ **Code** _____

Coach _____ **E-Mail** _____ **Phone #** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Contact Person _____ **E-Mail** _____ **Phone** _____

of Girl Swimmers _____ **# Individual Girls Entries** _____ x \$4.00 = \$ _____

of Girls Relays _____ x \$8.00 = \$ _____

of Boy Swimmers _____ **# Individual Boys Entries** _____ x \$4.00 = \$ _____

of Boys Relays _____ x \$8.00 = \$ _____

Swimmer Surcharge If Applicable.....Total # Swimmers _____ X \$5.00 = \$ _____

Total Amount Due: \$ _____

(Checks Payable to Delaware Swim Team Boosters)

Entry Deadline: *Friday, October 5, 2007.*

Mail Entries to: *Delaware Swim Team Booster Club*

c/o Kathy Drysdale/Meet Entries

2150 New Castle Avenue

New Castle, DE 19720

Phone: *(302) 652-4378*

I certify that all swimmers from this team entered in this meet are current members of USA Swimming and that all coaches from this team who will attend this meet hold current USA Swimming coaching credentials.

Head Coach's Signature _____

THIS ENTRY SUMMARY FORM MUST BE FILLED OUT COMPLETELY

