

2nd Annual Ralph Crocker Classic

James E. Martin Aquatic Center

Auburn University, Alabama

February 1-3, 2008

SANCTIONED BY: Southeastern Swimming, Inc. of USA Swimming
Sanction # 08SEAUB2-1

HOSTED BY: Auburn Aquatics

LOCATION: James E. Martin Aquatic Center on the campus of Auburn University.

FACILITY: POOL Indoor 50 meter by 25-yard pool, offering 16 lanes for short course competition. It is one of the fastest pools in the country with pool depth ranging from 9 feet at the shallowest to 16 feet.

TIMING Automatic timing will be provided by Colorado Timing System with HYTEK interface on both courses. Manual back up will be used. An 8-lane scoreboard will be available on only one course.

RULES: 2008 USA Swimming rules will govern the meet.

OFFICIALS: Meet Director: Jeff Dellinger
Referee: Clark Hammond and Dave Smith
Official: Charlie Eick

WARM-UP AND START TIMES:

The pool will be available for warm-ups at 4:00pm Friday night with competition starting at 5:10pm. Saturday morning warm-ups at 8:00am with competition beginning at 9:10am and Sunday morning warm-ups beginning at 8:00am with competition beginning at 9:10am afternoon competition will be 1 hr. 10 min. after completion of morning session. All warm-ups will be split into two 30 minute warm up sessions. Southeastern Swimming Safety Guidelines and Warm-up Procedures will be in effect at this meet. All times are Central Standard Time.

SAFETY: In the interest of safety and accident prevention, spectators, coaches and swimmers are asked to observe all posted pool rules and to conduct themselves in a safe manner. **Only meet officials, meet volunteers, coaches and swimmers will be allowed on the pool deck.** Nobody will be allowed to climb on the diving boards or diving towers for any reason. Coaches are asked to help control the crowded pool deck by making sure all swimmers that are not at Clerk of Course stay upstairs in the spectator area.

ELIGIBILITY: All swimmers must be USA Swimming registered. Coaches and officials must show certification as required by USA Swimming.

ENTRIES: The meet will be limited based on a four hour time line for Friday evening, Saturday and Sunday morning. Saturday and Sunday afternoon sessions will be limited to no longer than 4 and ½ hours. Teams are urged to submit entries using HYTEK's "Team Manager" program via email. A computer printout of entries with the event numbers and event description must accompany the team check with events in published order. Teams without "Team Manager" must use enclosed entry forms. Entries are to be listed in short course yards or "NT".

ENTRY FEES: \$4.00 per individual event (\$5.00 per hand entered entry)
\$3.00 SES surcharge per swimmer
\$5.00 LATE FEE per individual event (\$6.00 per hand entered entry)
Make checks payable to: AUBURN AQUATICS and mail with entry packet.

ENTRY LIMIT: Swimmers may enter a maximum of 2 events on Friday and no more than 4 individual events per day for Saturday and Sunday.

LATE ENTRIES: Late entries may be accepted at the discretion of the Meet Director for those swimmers already entered into the meet. No late entries will be accepted after 5:00pm Thursday, January 24th.
NEW SWIMMERS WILL NOT BE ENTERED INTO THE MEET.

ENTRY ERRORS: If due to Auburn Aquatics error, the swimmer will be deck entered into an open lane of the heat nearest his/her entry time or in a new heat. The entire event WILL NOT be reseeded.

ENTRY DEADLINE: Entry forms, printouts, release/recap sheet and entry fees including surcharges must be received by the Meet Director on or before Tuesday, January 22, 2007, subject to entry limits.

MAIL ENTRIES TO: Email entries to jeffdellinger@msn.com
Mail to: Meet Director, Ralph Crocker Classic
Auburn Aquatics
James E. Martin Aquatics Center
Biggio Dr.
Auburn, AL 36849
334-707-1980

- SEEDING:** All events are timed finals and will be seeded according to all applicable USA Swimming rules. Seed times will be times entered on the entry form. Entries with no time (NT) will be seeded by random draw. Notification of scratches will be appreciated in case lanes are needed for late entries.
The 500 Free, 400 IM and 1650 Free will be seeded fast to slow and combined if necessary to expedite the meet. We reserve the right to limit any event as necessary due to the session limitations. All Senior events will be limited to 13 and over swimmers only. Teams will be notified if any events have been limited as stated above. The courses and events will be split or combined at the discretion of the meet referee in the interest of running the most efficient meet.
- SCRATCHES:** All scratches should be submitted to the Clerk of Course as soon as possible to provide lanes for possible late entries.
- AWARDS:** All awards will be based on high point scoring for each of the 12 and under age groups. Trophies will be given to the top 16 places in each of the 12 and under age groups for total points scored in the meet. Scoring for age group high point will be 20-17-16-15-14-13-12-11-9-7-6-5-4-3-2-1.
- SCORING:** There will be no Team scoring. Only 12 and under age groups will be scored.
- COACHES MEETING:** A coaches meeting will be held at the following times:
Friday, 5:00 pm
- HOSPITALITY:** There will be a hospitality room available for coaches and officials only. Lunch will be provided on Saturday and Sunday.
- CONCESSIONS:** There will be a concession area provided upstairs in the spectator area. Heat Sheets and T-shirts will also be for sale in this area.
- EVALUATION:** John Woods, General Chairman
Southeastern Swimming
172 Stonehaven Dr.
Pelham, AL 35124

2nd Annual Ralph Crocker Classic
Friday Evening, February 1st

Warm-ups 4:00-5:00 p.m. Start 5:10 p.m. 2 event maximum

Girls		Event		Boys
1		Senior 50 FR		2
3		13-14 50 FR		4
5		Senior 200 IM		6
7		13-14 200 IM		8
9	6:46.39	Senior 500 FR*	6:19.39	10
11	6:51.79	13-14 500 FR*	6:35.99	12

Saturday Morning, Feb. 2nd Warm ups 8-9 am Start 9:10 am 4 event maximum

13		10 & U 50 FR		14
15		11-12 50 FR		16
17		10 & U 100 BR		18
19		11-12 100 BR		20
21		10 & U 100 FL		22
23		11-12 100 FL		24
25		10 & U 50 BK		26
27		11-12 50 BK		28
29		10 & U 100 IM		30
31		11-12 100 IM		32
33	3:20.19	10 & U 200 FR	3:09.89	34
35	2:43.49	11-12 200 FR	2:39.39	36

Saturday Afternoon, Feb. 2nd Warm-ups after morning session Meet will start no sooner than 12:10 p.m. 4 event maximum

37		13-14 50 BK		38
39		Senior 50 BK		40
41		13-14 200 BK		42
43		Senior 200 BK		44
45		13-14 100 FR		46
47		Senior 100 FR		48
49		13-14 200 FL		50
51		Senior 200 FL		52
53		13-14 100 BR		54
55		Senior 100 BR		56
57		13-14 50 FL		58
59		Senior 50 FL		60
61	6:12.89	13-14 400 IM	5:52.79	62
63	6:06.49	Senior 400 IM	5:37.29	64

Sunday Morning, Feb. 3rd Warm-ups 8:00-9:00 a.m. Start 9:10 a.m. 4 event maximum

65	3:42.69	10 & U 200 IM	3:40.89	66
67	3:04.99	11-12 200 IM	3:03.49	68
69		10 & U 50 FL		70
71		11-12 50 FL		72
73		10 & U 100 BK		74
75		11-12 100 BK		76
77		10 & U 50 BR		78
79		11-12 50 BR		80
81		10 & U 100 FR		82
83		11-12 100 FR		84
85	7:10.79	10 & U 500 FR	7:05.49	86
87	7:10.79	11-12 500 FR	7:05.49	88

Sunday Afternoon, Feb. 3rd Warm-ups after morning session Meet will start no sooner than 12:10 p.m. 4 event maximum

89		13-14 100 IM		90
91		Senior 100 IM		92
93		13-14 200 FR		94
95		Senior 200 FR		96
97		13-14 100 FL		98
99		Senior 100 FL		100
101		13-14 200 BR		102
103		Senior 200 BR		104
105		13-14 100 BK		106
107		Senior 100 BK		108
109		13-14 50 BR		110
111		Senior 50 BR		112
113	23:18.79	13-14 1650 FR	21:55.89	114
115	23:18.79	Senior 1650 FR	21:55.89	116

**Southeastern Swimming
Information Form for Disabled Swimmers**

NAME:		AGE:		DATE OF BIRTH:	
ADDRESS:				PHONE NUMBER:	
EVENTS ENTERED:					
EVENT:		NO.	EVENT:		NO.
EVENT:		NO.	EVENT:		NO.
EVENT:		NO.	EVENT:		NO.
DESCRIBE TYPE AND EXTENT OF DISABILITY (Be specific; e.g. totally or partially blind or deaf; loss of limbs, multiple disabilities):					
THE FOLLOWING PERSONS WILL ACCOMPANY THE SWIMMER FOR ANY NEEDED ASSISTANCE:			NAME:		
			NAME:		
SEIZURES?	YES: <input type="checkbox"/>	ARE YOU ON MEDICATION?	YES: <input type="checkbox"/>	MEDICATION/DOSE:	
	NO: <input type="checkbox"/>		NO: <input type="checkbox"/>		
MEDICATION/DOSE:		MEDICATION/DOSE:		MEDICATION/DOSE:	
PARENT OR GUARDIAN'S NAME:				PHONE NUMBER:	
PARENT OR GUARDIAN'S SIGNATURE:			ATHLETE'S SIGNATURE:		
PHYSICIAN'S NAME:				PHONE NUMBER:	
PHYSICIAN'S ADDRESS:					
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:
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WAIVER, ACKNOWLEDGMENT AND LIABILITY RELEASE:

I, the undersigned coach or team representative, verify that all of the swimmers and coaches listed on the enclosed entry are registered with USA Swimming and in compliance with required certifications. I also acknowledge that I am familiar with the rules of USA Swimming and Southeastern Swimming, Inc. regarding warm-up procedures and meet safety guidelines, and that I shall be responsible for the compliance of my team's swimmers with those rules during this meet. Auburn Aquatics, Southeastern Swimming, Inc. and USA Swimming, Inc., their agents, officers, representatives, employees and coaches shall be free from any liability or claim for damages for any and all injuries, illnesses or damage to valuables which may be sustained at this meet or while in transit to and from this meet. I also acknowledge that by entering this meet, I am granting permission for the names of any or all of my team's swimmers to be published on the internet in the form of Psych Sheets, Meet Results or any other documents associated with the running of this meet.

SIGNATURE OF COACH OR CLUB OFFICIAL:	
CLUB:	
TITLE:	DATE:

TEAM INFORMATION

CLUB NAME:		INITIALS:	
ADDRESS:			
LSC:		HEAD COACH:	
CONTACT PERSON:			PHONE NUMBER:
FAX NUMBER:		CELL PHONE:	EMAIL:
COACHES ATTENDING:	1.		
	2.		
	3.		
	4.		
CERTIFIED OFFICIALS WHO MAY WISH TO WORK:	1.		
	2.		
	3.		
	4.		
NUMBER OF SWIMMERS ENTERED:		ATTACHED:	
		UNATTACHED:	
		TOTAL:	

SUMMARY OF FEES

NUMBER OF SWIMMERS:		X \$3.00 SES SURCHARGE	=	
NUMBER OF IND. EVENTS:		X \$4.00 PER EVENT ENTRY FEE	=	
NUMBER OF Hand Entries:		X \$5.00 PER Hand Entered Entry	=	
TOTAL DUE:				

ENTRY FORM

Times should be in Short Course Yards
Please duplicate as needed

		EVENT #	EVENT NAME	BEST TIME	EVENT #	EVENT NAME	BEST TIME
NAME OF SWIMMER							
USS REGISTRATION NO.							
DATE OF BIRTH	SEX						
NAME OF SWIMMER							
USS REGISTRATION NO.							
DATE OF BIRTH	SEX						
NAME OF SWIMMER							
USS REGISTRATION NO.							
DATE OF BIRTH	SEX						
NAME OF SWIMMER							
USS REGISTRATION NO.							
DATE OF BIRTH	SEX						