



2019 12th ANNUAL SANTA'S B.E.S.T.
Biloxi, MS
December 6 – December 8, 2018



- SANCTION:** *Held under the sanction of United States Swimming and Mississippi Swimming, Inc. **Sanction MSI #1937***
- SPONSORS:** *Biloxi Elite Swim Team, City of Biloxi, and Biloxi Public Schools*
- LOCATION:** *Biloxi Natatorium, 1384 Father Ryan Avenue, Biloxi, MS 39530.*
- FACILITY:** *Indoor 50 meter by 25-yard pool with a 10/12-lane, 25-yard competition course with a 4-foot minimum depth and non-turbulent lane lines for short course competition. 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 display scoreboard. Manual back up will be used. Continuous warm-up/warm-down will be available in the deep end.*
- 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.*
- Operation of a drone, or any other flying apparatus, is prohibited over the venue (pools, athlete/coach areas, spectator areas and open ceiling locker rooms) any time athletes, coaches, officials and/or spectators are present.*
- 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 SHORT COURSE YARDS for the meet.*

MEET FORMAT: *This is a timed finals meet. For all events on Friday they will be scored as 10 & under, 11 – 12, 13 – 14, and 15 & Over. All other events will be scored as they are swum. All events less than 400 yards will be pre-seeded. All events 400 yards or longer will be deck-seeded. Swimmers must sign-in for all deck-seeded events no later than 30 minutes prior to the scheduled start of each day's session. If the swimmer is not checked in, the swimmer is legally scratched from the event. Only the swimmer or his/her coach may sign in for deck-seeded events. The 500 Free, 400 IM, and 1650 Free will be swum as open, fastest to slowest, alternating girls/boys, but scored separately. Swimmers may be required to provide their own timers for deck seeded events.*

ENTRIES: *A Swimmer may swim a maximum of **two (2) individual** events on Friday, and **four (4) individual** events plus **one (1) relay** all other days.*

ALL ENTRIES MUST BE RECEIVED NO LATER THAN 11:59 P.M. ON SUNDAY, NOVEMBER 24, 2019.

Please send compatible meet entry file for Hy-Tek Meet Manager via email. And fax and/or email the 2019 Santa's BEST Team Entry Summary Report Sheet at the end of the invitation. There will be an additional surcharge per athlete (Ten dollars, \$10.00) if team entries have to be hand entered, in other words if 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.

If a swimmer who is not properly registered with USA Swimming competes in a sanctioned competition, MS Swimming will impose a fine of \$100.00 per event against the individual, member coach or member club submitting the entry.

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

ENTRY FEE: \$4.00 per individual event
 \$10.00 per relay event
 \$20.00 total per swimmer surcharge [*\$5.00 MSI surcharge + \$15.00 facility surcharge per swimmer (includes digital heat sheet)*]

 \$10.00 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 500 swimmers. Additional entries may be accepted by discretion of the meet director.*

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 teams/swimmers to use your areas' starting blocks.*

Meet management reserves the right to change the duration of each warm-up session and/or add an additional warm-up session if needed, ample notification will be given if possible.

SCHEDULE:	Friday warm-ups	4:00 p.m.
	Competition	5:15 p.m.
	Saturday/Sunday morning warm-ups	7:30 a.m.
	Competition	8:45 a.m.
	Saturday/Sunday afternoon warm-ups	No earlier than 11:30 a.m.
	Competition	No earlier than 12:30 p.m.

SCORING: *Top 10 points scoring will be used.*

AWARDS: *Ribbons: Places 1 – 20*
 Team Awards: 1st – 3rd
 High Point & Runner-up Awards: Male & Female of each age group

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 the facility. Teams may also be responsible for providing timers. Timer numbers will be based on numbers of athletes entered.

OFFICIALS: Please return the enclosed sheet for 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

REFEREE: Todd Patterson toddpatterson@bellsouth.net

MEET

DIRECTOR: Jamie Lee jlee283@cableone.net

MEET

MARSHALL: Various Meet Marshalls will be on deck with proper identification.

4-HOUR RULE:

If an age group for 12 & under swimmer 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 back of the 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.

**2019 SANTA'S B.E.S.T
ORDER OF EVENTS**

Session 1

Friday Evening, December 6, 2019

Warm-up 4:00 PM

Competition 5:15 PM

<u>Girls Event #</u>	<u>Event</u>	<u>Boys Event #</u>	<u>Event</u>
1	Open 500 Free	2	Open 500 Free
3	Open 400 IM	4	Open 400 IM
5	Open 1650 Free	6	Open 1650 Free

Session 2

Saturday Morning, December 7, 2019

Warm-up 7:30 AM

Competition 8:45 AM

<u>Girls Event #</u>	<u>Event</u>	<u>Boys Event #</u>	<u>Event</u>
7	8&U 100 Medley Relay	8	8&U 100 Medley Relay
9	10&U 200 Medley Relay	10	10&U 200 Medley Relay
11	8&U 100 IM	12	8&U 100 IM
13	9-10 100 IM	14	9-10 100 IM
15	6&U 25 Breast	16	6&U 25 Breast
17	7-8 25 Breast	18	7-8 25 Breast
19	9- 10 50 Breast	20	9-10 50 Breast
21	8&U 50 Back	22	8&U 50 Back
23	10&U 100 Back	24	10&U 100 Back
25	8&U 50 Fly	26	8&U 50 Fly
27	10&U 100 Fly	28	10&U 100 Fly
29	6&U 25 Free	30	6&U 25 Free
31	7-8 25 Free	32	7-8 25 Free
33	9-10 50 Free	34	9-10 50 Free

Session 3

Saturday Afternoon, December 7, 2019

Warm-up No earlier than 11:30 PM

Competition No earlier than 12:30 PM

<u>Girls Event #</u>	<u>Event</u>	<u>Boys Event #</u>	<u>Event</u>
35	11-12 200 Medley Relay	36	11-12 200 Medley Relay
37	13-14 200 Medley Relay	38	13-14 200 Medley Relay
39	Open 400 Medley Relay	40	Open 400 Medley Relay
41	11-12 100 Back	42	11-12 100 Back
43	13-14 200 Back	44	13-14 200 Back
45	Open 200 Back	46	Open 200 Back
47	11-12 50 Breast	48	11-12 50 Breast
49	13-14 100 Breast	50	13-14 100 Breast
51	Open 100 Breast	52	Open 100 Breast
53	11-12 200 Free	54	11-12 200 Free
55	13-14 200 Free	56	13-14 200 Free
57	Open 200 Free	58	Open 200 Free
59	11-12 100 Fly	60	11-12 100 Fly
61	13-14 200 Fly	62	13-14 200 Fly
63	Open 200 Fly	64	Open 200 Fly
65	11-12 50 Free	66	11-12 50 Free
67	13-14 50 Free	68	13-14 50 Free
69	Open 50 Free	70	Open 50 Free

Session 4

Sunday Morning, December 8, 2019

Warm-up 7:30 AM

Competition 8:45 AM

<u>Girls Event #</u>	<u>Event</u>	<u>Boys Event #</u>	<u>Event</u>
71	8&U 100 Free Relay	72	8&U 100 Free Relay
73	10&U 200 Free Relay	74	10&U 200 Free Relay
75	8&U 100 Free	76	8&U 100 Free
77	10&U 200 Free	78	10&U 200 Free
79	6&U 25 Fly	80	6&U 25 Fly
81	7-8 25 Fly	82	7-8 25 Fly
83	9-10 50 Fly	84	9-10 50 Fly
85	6&U 25 Back	86	6&U 25 Back
87	7-8 25 Back	88	7-8 25 Back
89	9-10 50 Back	90	9-10 50 Back
91	8&U 50 Breast	92	8&U 50 Breast
93	10&U 100 Breast	94	10&U 100 Breast
95	8&U 50 Free	96	8&U 50 Free
97	9-10 100 Free	98	9-10 100 Free

Session 5

Sunday Afternoon, December 8, 2019

Warm-up No earlier than 11:30 PM

Competition No earlier than 12:30 PM

<u>Girls Event #</u>	<u>Event</u>	<u>Boys Event #</u>	<u>Event</u>
99	11-12 200 Free Relay	100	11-12 200 Free Relay
101	13-14 200 Free Relay	102	13-14 200 Free Relay
103	Open 400 Free Relay	104	Open 400 Free Relay
105	11-12 50 Fly	106	11-12 50 Fly
107	13-14 100 Fly	108	13-14 100 Fly
109	Open 100 Fly	110	Open 100 Fly
111	11-12 100 Breast	112	11-12 100 Breast
113	13-14 200 Breast	114	13-14 200 Breast
115	Open 200 Breast	116	Open 200 Breast
117	11-12 50 Back	118	11-12 50 Back
119	13-14 100 Back	120	13-14 100 Back
121	Open 100 Back	122	Open 100 Back
123	11-12 200 IM	124	11-12 200 IM
125	13-14 200 IM	126	13-14 200 IM
127	Open 200 IM	128	Open 200 IM
129	11-12 100 Free	130	11-12 100 Free
131	13-14 100 Free	132	13-14 100 Free
133	Open 100 Free	134	Open 100 Free

2019 Santa's BEST Team Entry Summary Report Sheet

Club Name: _____ Club Code: _____

Total number of swimmers _____ x \$20.00 (+\$10.00 if hand entry required) = _____

Total number of individual entries _____ x \$4.00 = _____

Total number of relay entries _____ x \$10.00 = _____

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, Biloxi Public Schools, 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