

2010 NORTHEAST OHIO YMCA SWIM LEAGUE CHAMPIONSHIPS

Date: Saturday March 6, 2010

Location: Cleveland State University
2121 Euclid Ave. PE Bldg.
Cleveland, OH 44115

Director: Debbie Josif
North Canton YMCA
200 South Main St. North Canton
Phone: 330-499-2587 Fax: 330-499-4019
Email: djosif@ymcastark.org

Swimmers Eligibility: To be eligible to swim in the League Championships, swimmers must have also participated in their Divisional Championship Meet. If for some reason they were absent and did not swim in the Divisional Championship Meet, they are then not eligible to be used, even as an alternate, in the League Championships.

Individuals who swim on a relay team in their Divisional Championship Meet need not be the same four (4) who swim at the League Championship Meet. The identity of the relay qualifies; eight (8) swimmers can be specified for the League Championship Meet. All eight (8) swimmers must have participated in their Divisional Championship Meet.

Qualifying from the Divisional Championship Meet: In the 8 & Under, Cadet (10 & Under) and Prep (11 & 12) age groups, each division will qualify its top three (3) swimmers per event and then the top remaining swimmers in order to qualify a full three (3) heats regardless of their division. This will qualify a total of 24 swimmers in an 8 lane pool or 18 swimmers in a 6 lane pool.

In the Junior (13 & 14) and Intermediate (15 & Up) age groups, each division will qualify its top two (2) swimmers per event and then the next at large swimmers, regardless of the division, in order to qualify two (2) full heats. This will qualify 16 swimmers in an 8 lane pool and 12 swimmers in a 6 lane pool.

The cut off times and names of **qualifying League swimmers** will be emailed to the coaches and Aquatic Directors by 10:00pm Monday, February 8th. It is then the responsibility of each Divisional Meet Director to notify Debbie Josif at djosif@ymcastark.org of any concerns they may have regarding this information within in twenty four (24) hours of its posting. Please, only Divisional Meet Directors should contact Debbie.

The League Championship psych sheet will then be posted on the League website: neoswim.org by Wednesday, February 10th.

Rules: The 2009 – 2010 Northeast Ohio YMCA Competitive Swimming and Diving League Rules and By-Laws as well as the USA Swimming Rules and Regulations will be followed.

YMCA warm up guide lines will also be followed. Teams will receive their lane assignments for warm-ups in their team packet the morning of the meet.

Schedule: **AM Session –** Intermediates (15 & Over), Juniors (13 & 14) and 8 & Under age groups
 Warm up Times: 13 & Over – 7:30am – 8:00am
 8 & Under – 8:00am – 8:30am
 Morning Session will begin at 8:45am

PM Session - Preps (11 & 12) and Cadets (9 & 10) age groups
 Warm up Times: 11 & 12 – 1:00pm – 1:30pm
 9 & 10 – 1:30pm – 2:00pm

Afternoon Session begins at 2:15pm if warm ups start at 1:00pm

Warm ups will not start before 1:00pm. If the morning session runs longer than scheduled, a 20 minute break will be taken between the sessions before warm ups will begin. New warm up times will be announced if this occurs.

ATTENTION COACHES:

Swimmer Waiver Form: Cleveland State University requires any swimmer participating in the swim meet to have the Parent's Consent, Release and Waiver of Liability Form completed and signed by the swimmer's parent. Coaches must bring signed waivers from all swimmers to the AM coaches meeting. No swimmer will be permitted to participate in the meet unless a waiver is signed and turned in.

Please see attachment for the waiver.

Doors open: 7:00am

Entry Fees: Individual Event = \$3.00
 Relay Event = \$12.00
*Please make checks payable to the N.E.O. Swim League.
 Checks will be collected at the AM Coaches Meeting.*

Coaches Meeting: AM Session – 7:45 am in Hospitality Room

PM Session – To be announced if it is decided one is needed

Timer, Runner and Official's Meetings: AM and PM sessions will be held 15 minutes before the start of the session.

Clerk of Course: **AM Session:** **8 & Under** swimmers **must report to the Clerk of Course** for all events. A coach or team representative must be present at Clerk of Course for all relays.
 13 & Over swimmers will report behind the blocks for all events when **ON CALL only.**

PM Session: **11 & 12 and 9 & 10** swimmers will report behind the blocks for all events when **ON CALL only.**

Coaches, Volunteers, Aquatic Directors and/or Designated Team Representative: Please report to the check in table to receive your name tag. Only those with name tags will be permitted on deck

Coaches Hospitality Room: Located off the pool deck near the diving area.

Parking Fee: Parking Garage: **\$6.00**
 Parking on street: **Free on weekend**

Spectator Admission: \$5.00 a person
 5 & Under – no charge

Heat Sheets: \$3.00 a session or \$5.00 for both sessions

Spectator Seating: The seating area for spectators will be the balcony area.
No spectators will be allowed on pool deck at anytime.

Swimmer Seating: Seating for swimmers will be on the pool deck.

Awards: Metals – 1st thru 8th place
 Ribbons – 9th thru 16th place
 All awards will be given to the coaches after the completion of the meet.

T-Shirts: Sold during AM and PM Sessions while supplies last

Swimming Vendor: Competitive Aquatic Supply

Concessions: Provided by the Natatorium Staff

Singer of the National Anthem:

AM Session – 1 volunteer or a group
 PM Session – 1 volunteer or a group

Announcer:

AM Session – 1 volunteer
 PM Session – 1 volunteer

Coaches please contact Debbie Josif if you have any volunteers to sing the National Anthem and/or Announcer

Division 2 and 3 **League Job Assignments**

Listed below are the other League Meet Volunteer Assignment Areas, a description and the # of volunteers needed from Division 2 and 3. The Volunteer assignments were chosen by the teams at the League Meeting held in September 2009..

If a team does not provide volunteers needed the session will not begin until that team supplies the volunteers required.

All names of volunteers for your team area listed below must be emailed or faxed by:

Friday, February 26th

Debbie Josif: **Email – djosif@ymcastark.org**
Faxed – 330-499-4019

CLERK OF COURSE:

| | |
|------------------------------------|-------------------|
| North Canton YMCA – | AM Session |
| Lake Anna and Copley YMCA – | PM Session |

Clerk of Course: Supply volunteers to organize and check in swimmers before their events

AM Session – 8 volunteers **check in by 8:00am** from North CantonYMCA

PM Session – 3 volunteers from each team **check in by 1:30pm** from Lake Anna and Copley

ADMISSIONS:

| | |
|--------------------------|-------------------|
| Vermillion YMCA – | AM Session |
| West Shore YMCA - | PM Session |

Admissions: Supply volunteers to work at the admission table.

AM Session – 2 volunteers **check in by 6:45am** from the Vermillion YMCA

PM Session - 2 volunteers **check in by 12:15pm** from the West Shore YMCA

CROWD CONTROL:

| | |
|------------------------------|--------------------------|
| Cuyahoga Falls YMCA – | AM and PM Session |
|------------------------------|--------------------------|

Crowd Control: Supply volunteers to stand on the pool deck at assigned areas to make sure only swimmers, coaches and volunteers get on to the pool deck. Only swimmers will be permitted on deck with out a name tag. These volunteers will also make sure the swimmers leave the deck area through the locker rooms only.

AM Session – 3 volunteers **check in by 7:00am**

PM Session – 3 volunteers **check in by 12:30pm**

HOSPITALITY ROOM:

Ashland YMCA –

AM Session

Tuscarawas YMCA –

PM Session

Hospitality Room: Supply volunteers who will help in the Hospitality Room with the food and drink.

AM Session – 2 volunteers (rotate) **check in by 7:15am** from Ashland YMCA

PM Session – 2 volunteers (rotate) **check in by 12:30am** from TuscarawasYMCA

T-SHIRT SALES:

Ridgewood YMCA -

AM and PM Session

T- Shirt Sales: Supply volunteers to sell T-Shirts.

AM Session – 2 volunteers **check in by 6:45am**

PM Session – 2 volunteers **check in by 12:30pm**

HEAT SHEET SALES:

Orrville YMCA –

AM Session

Louisville YMCA -

PM Session

Heat Sheet Sales: Supply volunteers to sell heat sheets.

AM Session – 2 volunteers **check in by 6:45am** from the Orrville YMCA

PM Session – 2 volunteers **check in by 12:15pm** from the Louisville YMCA

AWARDS:

Hillcrest YMCA –

AM and PM Session

Awards: Supply volunteers to work at the awards table

AM Session – 2 volunteers **check in by 8:00am**

PM Session – 2 volunteers **check in by 1:30pm**

Order of Events

1. Girls 15 & Over 200 Medley Relay
2. Boys 15 & Over 200 Medley Relay
3. Girls 13-14 200 Medley Relay
4. Boys 13-14 200 Medley Relay
5. Girls 8 & Under 100 Medley Relay
6. Boys 8 & Under 100 Medley Relay
7. Girls 15 & Over 200 Freestyle
8. Boys 15 & Over 200 Freestyle
9. Girls 13-14 200 Freestyle
10. Boys 13-14 200 Freestyle
11. Girls 15 & Over 200 IM
12. Boys 15 & Over 200 IM
13. Girls 13-14 200 IM
14. Boys 13-14 200 IM
15. Girls 15 & Over 50 Freestyle
16. Boys 15 & Over 50 Freestyle
17. Girls 13-14 50 Freestyle
18. Boys 13-14 50 Freestyle
19. Girls 8 & Under 25 Freestyle
20. Boys 8 & Under 25 Freestyle
21. Girls 15 & Over 100 Butterfly
22. Boys 15 & Over 100 Butterfly
23. Girls 13-14 100 Butterfly
24. Boys 13-14 100 Butterfly
25. Girls 8 & Under 25 Butterfly
26. Boys 8 & Under 25 Butterfly
27. Girls 15 & Over 100 Freestyle
28. Boys 15 & Over 100 Freestyle
29. Girls 13-14 100 Freestyle
30. Boys 13-14 100 Freestyle
31. Girls 8 & Under 50 Freestyle
32. Boys 8 & Under 50 Freestyle
33. Girls 15 & Over 500 Freestyle
34. Boys 15 & Over 500 Freestyle
35. Girls 13-14 500 Freestyle
36. Boys 13-14 500 Freestyle
37. Girls 15 & Over 100 Backstroke
38. Boys 15 & Over 100 Backstroke
39. Girls 13-14 100 Backstroke
40. Boys 13-14 100 Backstroke
41. Girls 8 & Under 25 Backstroke
42. Boys 8 & Under 25 Backstroke
43. Girls 15 & Over 100 Breaststroke
44. Boys 15 & Over 100 Breaststroke
45. Girls 13-14 100 Breaststroke
46. Boys 13-14 100 Breaststroke
47. Girls 8 & Under 25 Breaststroke
48. Boys 8 & Under 25 Breaststroke
49. Girls 15 & Over 200 Freestyle Relay
50. Boys 15 & Over 200 Freestyle Relay
51. Girls 13-14 200 Freestyle Relay
52. Boys 13-14 200 Freestyle Relay
53. Girls 8 & Under 100 Freestyle Relay
54. Boys 8 & Under 100 Freestyle Relay
55. Girls 11-12 200 Medley Relay
56. Boys 11-12 200 Medley Relay
57. Girls 10 & Under 200 Medley Relay
58. Boys 10 & Under 200 Medley Relay
59. Girls 11-12 200 Freestyle
60. Boys 11-12 200 Freestyle
61. Girls 10 & Under 200 Freestyle
62. Boys 10 & Under 200 Freestyle
63. Girls 11-12 100 IM
64. Boys 11-12 100 IM
65. Girls 10 & Under 100 IM
66. Boys 10 & Under 100 IM
67. Girls 11-12 50 Freestyle
68. Boys 11-12 50 Freestyle
69. Girls 10 & Under 50 Freestyle
70. Boys 10 & Under 50 Freestyle
71. Girls 11-12 50 Butterfly
72. Boys 11-12 50 Butterfly
73. Girls 10 & Under 50 Butterfly
74. Boys 10 & Under 50 Butterfly
75. Girls 11-12 100 Freestyle
76. Boys 11-12 100 Freestyle
77. Girls 10 & Under 100 Freestyle
78. Boys 10 & Under 100 Freestyle
79. Girls 11-12 50 Backstroke
80. Boys 11-12 50 Backstroke
81. Girls 10 & Under 50 Backstroke
82. Boys 10 & Under 50 Backstroke
83. Girls 11-12 50 Breaststroke
84. Boys 11-12 50 Breaststroke
85. Girls 10 & Under 50 Breaststroke
86. Boys 10 & Under 50 Breaststroke
87. Girls 11-12 200 Freestyle Relay
88. Boys 11-12 200 Freestyle Relay
89. Girls 10 & Under 200 Freestyle Relay
90. Boys 10 & Under 200 Freestyle Relay

**Cleveland State University
Parent's Consent, Release and Waiver of Liability**

IF APPLICANT IS LESS THAN 18 YEARS OF AGE, BOTH SIDES OF THIS FORM MUST BE COMPLETED AND SIGNED.

I hereby give my consent for my minor child, _____ to participate in _____, (the "event").

If my child becomes ill or is injured while participating in this event, please contact either of the following:

Daytime

Name _____ Phone (_____) _____

Name _____ Phone (_____) _____

Evening

Name _____ Phone (_____) _____

Name _____ Phone (_____) _____

In the event that reasonable attempts to contact the above-mentioned persons are unsuccessful or impractical, I hereby give my consent for emergency medical treatment to be administered to my child and/ or the transfer of my child to a treatment facility. I also release all such personnel from any claim whatsoever on account of first aid or service rendered to my child during participation in the event listed above.

I have read and fully understand the entire **RELEASE AND WAIVER OF LIABILITY**, including the paragraph relating to no known health problems or conditions and my consent to emergency treatment. In consideration for my child's participation in the event listed above, I do hereby agree to assume all the risks and responsibilities surrounding such participation and do hereby also for and on behalf of myself, my minor child, my heirs, executors, administrators and assigns waive, release and forever discharge Cleveland State University, its Board of Trustees, officers, employees, and agents from any and all liabilities, demands, claims, damages, losses, costs (including attorney's fees), actions and causes of action arising out of my child's participation in this event.

Parent's/Legal Guardian's Signature

Date

Parent's/Legal Guardian's Name (please print)

(_____)

Parent's/Legal Guardian's Phone

Parent's/Legal Guardian's Address

**Cleveland State University
Release and Waiver of Liability**

As consideration for my participation in the _____, (the "event") I hereby for myself, family, heirs, executors, administrators and assigns waive, release and forever discharge Cleveland State University and its Board of Trustees, officers, employees and agents from any and all liabilities, demands, claims, damages, losses, costs (including attorney's fees), actions and causes of action arising out of or in connection with my participation in the above listed event and/or the use of Cleveland State University facilities, furnishings, or equipment during this event, except to the extent such liabilities, demands, claims, damages, losses, costs (excluding attorney's fees), actions and causes of action are attributable to the negligent actions of Cleveland State University or its Trustees, officers, employees, or agents while acting within the course of their employment, as set forth in Ohio Revised Code Section 2743.02. I also acknowledge that Cleveland State University and its Trustees, officers, employees and agents assume no responsibility for any bodily injury, death, loss, illness or accident to myself or others or damage to personal property which may arise out of my participation in this event.

I fully understand and hereby acknowledge that participation in this event involves many risks, including the risks of serious bodily injury and death. In consideration of being allowed to participate in the event listed above, I voluntarily accept and assume all responsibility for and risk of such personal injury arising from such participation.

I understand that any University personnel or agents participating in this event are not necessarily medically trained to care for any physical or medical problems that may occur during this event. I release all such personnel from any claim whatsoever on account of first aid or service rendered to me during my participation in this event.

By placing my signature below, I acknowledge that I have adequate medical and hospitalization insurance for any injuries that I may incur as a result of participating in this event.

I attest and verify that I am 18 years of age or older, that I have had a recent physical examination and that I have no known health problems or conditions that could prevent me from successfully participating in this activity.

IF APPLICANT IS LESS THAN 18 YEARS OF AGE, THE PARENT'S CONSENT, RELEASE AND WAIVER OF LIABILITY ON THE BACK OF THIS FORM MUST ALSO BE COMPLETED AND SIGNED.

Participant's Name (Please print)

(_____)_____
Participant's Phone

Participant's Address

I have read and fully understand the entire **RELEASE AND WAIVER OF LIABILITY** and my signature below confirms my full understanding and voluntary acceptance of such **RELEASE AND WAIVER OF LIABILITY**.

Participant's Signature

Date