



**Pocono Family YMCA**  
 “Last Chance” Invitational  
 (Closed YMCA District / National Qualifier)  
**MONDAY February 27th, 2012**



<b>LOCATION</b>	<b>Pocono Mountain West High School, Pocono Summit Pa.</b>
<b>FACILITIES</b>	6 Lane, 25 yard, Entry Depth 9 Feet, Anti-Wave Lane Lines, Colorado Timing System, Paragon Starting Platforms, Hi-Tek Software, Spectator seating is for 200, Parking capacity well over 700
<b>MEET DIRECTOR</b>	Sonia Wolbert – 570-856-3355 or email – <a href="mailto:entries@pfyswim.org">entries@pfyswim.org</a>
<b>ELIGIBILITY</b>	<b>CLOSED to YMCA Teams ONLY</b> <b>Swimmers are limited to 4 Individual Events plus 2 Relays</b>
<b>ENTRY LIMITATIONS</b>	Swimmers may swim in 4 individual events and 2 relays. The Meet Director reserves the right to limit entries, events or heats, or to modify the meet format due to time or space constraints. <b>MEET TIMELINE WILL BE LIMITED TO 2.5 HOURS ENTRIES WILL BE ENTERED AS THEY RECEIVED.</b>  <b>PLEASE BE AWARE THERE ARE QUALIFYING STANDARDS TO HELP ALLOW SWIMMERS TO GET TO SWIM THEIR EVENT 2 TIMES IF TIME PERMITTING. QUALIFYING STANDARDS ARE INCLUDED IN MEET INFORMATION BELOW.</b>
<b>WARM-UP &amp; START TIMES</b>	<b>Warm up for Pocono - 5:30PM - 5:50PM</b> <b>Other Team Warm Up - 5:50PM - 6:10PM</b> <b>Last 5 Min One Way Starts Only Lanes 1-5 Only</b> <b>Meet Start Time is 6:15PM</b>
<b>DECK ENTRIES</b>	Subject to space availability, and at the discretion of the Meet Director, deck entries will be accepted prior to the start of meet but no later than 6:00 pm
<b>SWIMMERS WITHOUT COACH</b>	Swimmers unaccompanied by a coach should report to the Meet Director before the warm-up begins.
<b>SEEDING</b>	All events are pre-seeded timed finals. All events will be seeded by time not age group or by sex.

**Last Chance Invitational Meet – Monday, Feb 27th, 2012**  
**Pocono Family YMCA Swim Team**  
 809 Main Street Stroudsburg Pa. 18360  
 Phone: 570-421-2525 ext. 320 Fax: 570-422-6708  
<http://pfyswim.org>





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<b>HOW TO ENTER</b>	Entries may be submitted using Hy-Tek software. Entry times must be submitted in yards. All supporting paperwork must accompany all entries.
<b>ENTRY FEES</b>	\$4.00 per Individual event & \$8.00 per Relay
<b>SEND ENTRIES TO</b>	<b>Sonia Wolbert</b> <b>277 Prospect Street</b> <b>East Stroudsburg PA 18301</b> Phone: 570-350-2142, Fax: 570-422-6708 Entries may be emailed to <a href="mailto:entries@pfyswim.org">entries@pfyswim.org</a> in Team Manger format only.
<b>ENTRY DEADLINE</b>	<b>Sunday, February 26 by 11:00 PM.</b>
<b>RULES</b>	This meet will be conducted according to current USA Swimming Rules.
<b>SCORING &amp; AWARDS</b>	There will no scoring and no awards
<b>PROGRAMS &amp; ADMISSION</b>	Programs Free. Admission Free.
<b>RESULTS</b>	Results will be posted on the Pocono Piranhas Web Site. <a href="http://pfyswim.org">http://pfyswim.org</a> and emailed to teams after meet.
<b>DIRECTIONS</b>	<b>Pocono Mountain West Pool</b>  Take I-80 to I-380 North, to Route 940 West. Proceed thru 1 <sup>st</sup> light approx 1.5 miles. Make left onto school campus. Follow road to right to back of building (Lot C) Enter doors to left of pool.

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**SWIMMERS INDIVIDUAL ENTRY FORMS**

**All events are pre-seeded timed finals. Make copies for each swimmer as needed.**

Swimmers Last Name: \_\_\_\_\_ Swimmers First Name: \_\_\_\_\_ MI \_\_\_\_\_

Team Name: \_\_\_\_\_ Team Code: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

<u>Event #</u>	<u>Age</u>	<u>Distance</u>		<u>Description</u>	<u>Entry Time in Yards</u>
200 Med Relays					
3	Open / Mixed	100	Yard	Free	_____
4	Open / Mixed	50	Yard	Back	_____
5	Open / Mixed	100	Yard	IM	_____
6	Open / Mixed	100	Yard	Breast	_____
7	Open / Mixed	50	Yard	Fly	_____
8	Open / Mixed	200	Yard	IM	_____
9	Open / Mixed	50	Yard	Free	_____
10	Open / Mixed	100	Yard	Back	_____
11	Open / Mixed	200	Yard	Free	_____
12	Open / Mixed	50	Yard	Breast	_____
13	Open / Mixed	100	Yard	Fly	_____
200 Free Relays					

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<u>Event #</u>	<u>Age</u>	<u>Distance</u>		<u>Description</u>	<u>Entry Time in Yards</u>
5 Min Break (Second Session of Shorter Events Time Permitting)					
16	Open / Mixed	100	Yard	Free	
17	Open / Mixed	50	Yard	Back	
18	Open / Mixed	100	Yard	Breast	
19	Open / Mixed	50	Yard	Fly	
20	Open / Mixed	50	Yard	Free	
21	Open / Mixed	100	Yard	Back	
22	Open / Mixed	50	Yard	Breast	
23	Open / Mixed	100	Yard	Fly	

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**SWIMMERS RELAY ENTRY FORMS**

**All events are pre-seeded timed finals. MAKE COPIES FOR EACH RELAY AS NEEDED.**  
 RELAYS WILL BE SEATED BY TIME BUT ALL RELAYS NEED TO BE OF THE SAME SEX AND AGE GROUP.

Team Name: \_\_\_\_\_ Team Code: \_\_\_\_\_ Sex: \_\_\_\_\_

Relay Team Name: **(A) (B) (C) (D) (E) (F) (G)** (Circle one)

<b>Event #</b>	<b>Age</b>	<b>Distance</b>	<b>Description</b>	<b>Entry and Relay Name</b>
<b>1</b>	Open GIRLS	200 Yard	Medley Relay	Time: _____ : _____ Swimmer 1 _____ Swimmer 2 _____ Swimmer 3 _____ Swimmer 4 _____
<b>2</b>	Open BOYS	200 Yard	Medley Relay	Time: _____ : _____ Swimmer 1 _____ Swimmer 2 _____ Swimmer 3 _____ Swimmer 4 _____
<b>22</b>	Open GIRLS	200 Yard	Free Relay	Time: _____ : _____ Swimmer 1 _____ Swimmer 2 _____ Swimmer 3 _____ Swimmer 4 _____
<b>23</b>	Open BOYS	200 Yard	Free Relay	Time: _____ : _____ Swimmer 1 _____ Swimmer 2 _____ Swimmer 3 _____ Swimmer 4 _____

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**TEAM INFORMATION AND MEET ENTRY SUMMARY**

Team Name: \_\_\_\_\_ Team Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone # \_\_\_\_\_

Coaches Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_ Team Web Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Total number of **INDIVIDUAL ENTRIES**: \_\_\_\_\_ x \$ 4.00 = \_\_\_\_\_

Total number of **RELAY ENTRIES**: \_\_\_\_\_ x \$ 8.00 = \_\_\_\_\_

