

# 2007 StarMasters Pentathlon

## Saturday, September 22, 2007

**Sanction #:** 430

**Location:** **Micki Krebsbach Pool, 301 Deepwood Dr., Round Rock, TX**

Located just behind Round Rock High School, Krebsbach Pool can be reached from Austin via IH-35 and Mopac.

**From IH-35:** exit at Hwy. 620 and turn left (west) to Deepwood Dr. Turn left on Deepwood Dr. for approximately two blocks; parking lot and pool will be on your left.

**From Mopac:** head north to County Rd. 172 (the McNeil Cut-off). Turn left and follow under Hwy. 45. Go right when you reach McNeil Rd. (just over railroad tracks.) Left again (very soon) on Deepwood Dr. You will travel through a neighborhood. Parking lot and pool will be on your right after you pass the soccer/baseball fields.

**Facilities:** Eight lane, 25 **yard** outdoor course for competition with non-turbulent lane lines and starting blocks. Adjacent four lane, 20 yard course for continuous warm-up, warm down throughout the meet. Note: Recreational facilities (water slide, etc.) and the shallow end of the pool are off-limits during this meet.

**Pool Phone#:** (for emergencies) 218-7090 or 244-9835.

**Sanction & Eligibility:**

This meet is sanctioned by South Texas Masters Swimming for USMS, Inc. Open to all swimmers age 19 and older who are currently registered with United States Masters Swimming (USMS). Unregistered swimmers will not be allowed to compete. Copy of USMS card to be sent with entry.

**Per USMS rules (102.2.2), your age group shall be determined by the age as of DECEMBER 31, 2007**

**Entry Deadline and Fees:** Entries are due by **Tuesday, September 18**. Deck Entries will be accepted Saturday, 9/22, until 10am. Swimmers may enter five (5) events.

<b>Event</b>	<b>Fee On or Before 9/18/07</b>	<b>Fee After 9/18/07</b>
500 Free only	\$10	\$15
5 events or Pentathlon	\$25	\$30

All paid entrants will receive a Meet T-shirt. We will have food available for reasonable prices. Please make your check payable to **Lone Star Aquatic Club**. Send your entries and a copy of your USMS card to:

**Mark Parshall, Meet Director**  
**Lone Star Aquatic Club/StarMasters**  
**P.O. Box 851**  
**Round Rock, TX 78680**

**Phone# 512-248-1708 512-636-8577 mparshal@swbell.net**

If you can't reach Mark: Huddie Murray 512-835-1636 hwmsswim@yahoo.com

## Order of Events/Format

10:00AM Warm-up begins/ Deck entries close  
11:00AM – Pentathlon begins:  
50 Fly, 100 Fly, 200 Fly, 50 back, 100 Back, 200 Back,  
500 Free  
50 Breast, 100 Breast, 200 Breast, 50 Free, 100 Free, 200 Free  
10 minute break  
100 IM, 200 IM, 400 IM  
Awards presentation at the end of the competition

## Awards:

In order to be eligible for awards, you must swim one of the following sets of events:

- 50's of each stroke and the 100 IM
- 100's of each stroke and the 200 IM
- 200's of each stroke and the 400 IM

You may swim any combination of up to five events but you will not be eligible for an award unless you participate in a pentathlon. Awards will be given to male and female winners of each set of Pentathlon events in each age group. There will be no awards for individual events. Winners determined by lowest cumulative time. Any disqualification (DQ) will eliminate you from the competition for awards. (You may still complete your events.)

## Special Notes:

1. In the case of inclement weather, the rain date will be Sunday, September 23, at the conclusion of the Lone Star Unclassified Meet. (Approximately 1pm?)
2. This meet is short course **YARDS, and will be held in conjunction with the Lone Star Unclassified Meet. The Pentathlon will take place between sessions of that meet.**
3. Results will be posted on Lone Star Aquatic's website: [www.lonestaraquatics.org](http://www.lonestaraquatics.org)

**StarMasters Pentathlon – 9/22/07  
MEET ENTRY FORM**

Name: \_\_\_\_\_ Age on 12/31/07: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ PH#: \_\_\_\_\_

Team: \_\_\_\_\_ USMS#: \_\_\_\_\_ M/F: \_\_\_\_\_

T-Shirt Size: M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_

<u>Est Start Time</u>	<u>Women</u>	<u>Men</u>	<u>Event</u>
10:00AM			Warm Up begins/Deck entries close
	ORDER OF EVENTS		
11:00AM	1	2	50 Fly
	3	4	100 Fly
	5	6	200 Fly
	7	8	50 Back
	9	10	100 Back
	11	12	200 Back
	13	14	500 Free
	15	16	50 Breast
	17	18	100 Breast
	19	20	200 Breast
	21	22	50 Free
	23	24	100 Free
	25	26	200 Free
	<b>10 Minute Break</b>		
	27	28	100 IM
	29	30	200 IM
	31	32	400 IM

Pick a course below (Sprint, Middle, Distance or Custom) and enter your times in one only.

<b>Sprint Course</b>			
<u>Women</u>	<u>Men</u>	<u>Event</u>	<u>Entry Time</u>
1	2	50 Fly	_____
7	8	50 Back	_____
15	16	50 Breast	_____
21	22	50 Free	_____
27	28	100 IM	_____

<b>Middle Course</b>			
<u>Women</u>	<u>Men</u>	<u>Event</u>	<u>Entry Time</u>
3	4	100 Fly	_____
9	10	100 Back	_____
17	18	100 Breast	_____
23	24	100 Free	_____
29	30	200 IM	_____

<b>Distance Course</b>			
<u>Women</u>	<u>Men</u>	<u>Event</u>	<u>Entry Time</u>
5	6	200 Fly	_____
11	12	200 Back	_____
19	20	200 Brst	_____
25	26	200 Free	_____
31	32	400 IM	_____

<b>Custom Course (5 events max; no awards)</b>		
<u>Event #</u>	<u>Event</u>	<u>Entry Time</u>

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**\*\*\*\*Waiver of Liability:**

**“I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition) including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES, OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of U.S.M.S.”**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Attach photocopy of USMS card below:**