



Dear Parents, Coaches and Athletes

The following is the meet information for the **Maribyrnong & Moonee Valley SC Meet** being held on **Sunday July 26, 2009.**

This event is open to SSC swimmers from **Essendon, Hoppers Crossing, Bendigo and Bacchus Marsh**

****Those athletes that are qualified for our SSC District, State or National Squads (400 FR under 7:20.00 and 200 IM under 4:00.00)**** should compete in this meet and at this meet compete in events where they have not yet met the SV State qualifying standards.

It is recommended that SSC swimmers entering this event swim at least 3 events that they are nearest to meeting SV State or Country SC Qualifying Times

Confirmation Deadline 8:00pm Friday June 19, 2009

Meet Date: Sunday July 26, 2009

Meet Location: Melbourne Sports and Aquatic Centre (MSAC) Albert Park (25m pool)

Start Times: Athlete Check In/Dryland 7:30am, Pool Warm Up 7:40am, Start 9:00am

Entry Fees: \$10.00 per event (SSC Athletes Minimum 3 individual events)

Events: 100 IM, 50 FLY, 100 FR, 50 BK, 200 FLY, 100 BK, 400 FR, 200 BK, 50 FR, 100 BR, 200 FR, 50 BR, 200 BR, 100 FLY, 200 IM.

Age Groups: 11&U, 12-13, 14&O, Open
(Age as on the day of the event July 26, 2009)

Awards: Medals will be awarded for top 3 place getters in each event.

Meet Rules: FINA Rules, Australian Swimming Inc Rules, Swimming Victoria Rules

Officials: Parent support may be requested for timekeeping positions

Miscellaneous: Entry to venue FREE, Programme: \$5.00

[Maribyrnong & MV Meet Flyer](#) [SV State SC QT's](#) [SV Country SC QT's](#)

Confirmation Deadline 8:00pm Friday June 19, 2009

(Please remit this form with payment to the SSC Mailbox by 8pm Friday June 19, 2009)

My Son/Daughter _____ will participate in the Maribyrnong & Moonee Valley Meet on Sun. July 26, 2009 competing in the following events:

- | | | | | |
|---------------------------------|---------------------------------|---------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/> 100 IM | <input type="checkbox"/> 50 FLY | <input type="checkbox"/> 100 FR | <input type="checkbox"/> 50 BK | <input type="checkbox"/> 200 FLY |
| <input type="checkbox"/> 100 BK | <input type="checkbox"/> 400 FR | <input type="checkbox"/> 200 BK | <input type="checkbox"/> 50 FR | <input type="checkbox"/> 100 BR |
| <input type="checkbox"/> 200 FR | <input type="checkbox"/> 50 BR | <input type="checkbox"/> 200 BR | <input type="checkbox"/> 100 FLY | <input type="checkbox"/> 200 IM |

Total Number of Events _____ X \$10.00 = _____

Recommended SSC Athletes enter a minimum of 3 individual events. Coaches will review and adjust as necessary

[Please enclose total fees with this form in a sealed envelope to the SSC Mailbox]

Parent Signature: _____ Date: _____

Coach Signature: _____ Site Coord Signature: _____