



Dear Parents, Coaches and Athletes

The following is the meet information for the **Ballarat GCO SC Distance Meet** being held on **Sunday June 21, 2009.**

This event is for SSC athletes from **Bacchus Marsh and Bendigo (SSC District, State and National Squad levels).** Swimmers competing should enter one 400m event and 2 other events of any distance.

Confirmation Deadline 8:00pm Thursday June 4, 2009

- Meet Date:** Sunday June 21, 2009
- Meet Location:** Unisports Pool, University Of Ballarat, Mt Helen.
- Start Times:** Athlete Check In/Dryland 8:30am, Pool Warm Up 8:45am, Start 9:30am
- Eligible Athletes:** Bacchus Marsh, Bendigo (SSC District, State and National Squad level)
- Entry Fees:** \$5.00 per event for the 200 and 400 metre events
\$10.00 per event for the 800 and 1500 metre events
(Recommended SSC Athletes compete in a Minimum of 3 individual events)
- Events:** 200 FLY, 200 BK, 200 BR, 200 FR, 200 IM, 400 FR 400 IM, 800 FR, 1500 FR
- Age Groups:** All events swum as open but placed as 11/U, 12/13, 14/15 and 16/O
(Age as on the day of the event: June 21, 2009)
- Awards:** Ribbons will be awarded for all events.
- Meet Rules:** FINA Rules, Australian Swimming Inc Rules, Swimming Victoria Rules
- Officials:** Parent support may be requested for timekeeping positions
- Miscellaneous:** There may be an entry fee to the venue
[Ballarat GCO Meet Flyer](#) [Venue Information](#)
[SV SC State QT's](#) [SV SC Country QT's](#)

Confirmation Deadline 8:00pm Thursday June 4, 2009

(Please remit this form with payment to the SSC Mailbox by 8pm Thursday June 4, 2009)

My Son/Daughter _____ will participate in the Ballarat GCO SC Distance Meet on Sunday June 21, 2009 competing in the following events:

- 200 FLY 200 BK 200 BR 200 FR 200 IM
 400 FR 400 IM

Total Number of Events _____ X \$5.00 = _____

- 800 FR 1500 FR

Total Number of Events _____ X \$10.00 = _____

Total Event Cost for all events _____

Recommended SSC Athletes enter a minimum of 3 to a maximum of 5 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: _____