



**MT. HOOD AQUATICS**  
**HOWARD JONES MEMORIAL C MEET INVITATIONAL**  
*(FORMERLY THE JUNE OPEN C MEET)*  
**JUNE 20 & 21, 2009**

*Held under the sanction of USA Swimming, Inc.*

- Sanction No:** Meet Sanction #: Pending.
- Sponsor:** Mt. Hood Aquatics  
P.O. Box 129  
Gresham, Oregon 97030  
Website: [www.mthoodaquatics.org](http://www.mthoodaquatics.org)
- Location:** Mt. Hood Community College Aquatic Center  
26000 S.E. Stark Street  
Gresham, Oregon 97030  
Pool Phone: 503-491-7243
- Directions:** Take I-84 to the Troutdale Exit (Eastbound) or Exit 17 (Westbound). Continue past fast food restaurants, turn right at light on 257th. Continue up hill, approximately 2.6 miles, turn left onto 17<sup>th</sup> Street. Take first left into parking lot. The pool is on the left behind the soccer field.
- Facility:** Indoor 25 yards x 42 feet, 6 lanes with non-turbulence lane lines. The pool is 3.5 feet in the shallow end and 13.0 feet depth at the deep end. Electronic timing system. Facilities are accessible for swimmers with disabilities and they are encouraged to participate.  
**Open pool deck areas available for swimmers, coaches, and officials only.**
- Meet Referee:** Joanne Wisniewski
- Meet Director(s):** Cherie Strand and Dawn Main  
21508 S.E. Salmon Street  
Gresham, Oregon 97030  
(503) 667-1907  
[lunyone@yahoo.com](mailto:lunyone@yahoo.com)
- Eligibility:** This meet is open to all swimmers who are currently registered with USA Swimming or registered with a USA Swimming recognized foreign federation. Swimmers must not be entered in the Howard Jones Memorial Long Course Invitational. Swimmers may enter a maximum of 3 individual events per day. **No on deck registration will be permitted.** All swimmers must be supervised by a USA Swimming certified coach at the meet. If they do not have one, they must report to the Clerk of Course or Meet Director prior to warm-ups to be assigned one.
- Meet Limit:** Limited to the first 300 swimmers.
- Entry Limit:** Swimmers may enter a maximum of three (3) individual events per day, 6 total events for the meet.



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**Entry Fees:** \$6.00 Swimming Surcharge per swimmer (\$3.00 facility fee/\$3.00 OSI charge).  
\$2.00 Individual Event Fee  
**FEES MUST ACCOMPANY MEET ENTRY FORM.**  
Make checks payable to: Mt. Hood Aquatics.

**Entries:** Team Manager event file will be available for download on the MHA website ([www.mthoodaquatics.org](http://www.mthoodaquatics.org)) by April 25, 2009. Events will be filled on a first-come, first-serve basis.

**Teams with Hy-Tek capability are strongly encouraged to submit a Commlink entry File (cfile01.cl2) or by zipped e-mail file.**

Entries that require manual entry by MHA must be clearly legible. MHA will make every effort to correctly enter manual times, but are not responsible for data entry errors due to illegible entries. Hy-Tek Meet Manager Software will be used for the meet. Swimmers' ages as of 6/20/2009 and USA Swimming registration numbers must be included.

The following must be received by the Meet Entry Address on or before Entry Deadline:

- a.) For Hy-Tek Entries:
1. Hardcopy of the Hy-Tek TM "Meet Entries Report."
  2. Hardcopy of the Hy-Tek TM "Meet Entry Fee Report."
  3. Disk with Team's entries.
  4. Full Payment (indicate which team if writing a personal check).
  5. Master Entry Fee Summary (signed).
- b.) If using the Meet Entries form (not using Hy-Tek), a hardcopy of the meet entry form legibly filled out and full payment (indicate which team if writing a personal check). Include the Master Entry Fee Summary (signed).
- c.) Please send Howard Jones Memorial Long Course Invitational entries separately.
- Entry times should be Short Course Yards (SCY) only.**

**Entry Deadline:** Full payment with all required items listed in the above Entries Section must be received at Entry Address as follows:

a.) E-mail Entries: Email with attached Hy-Tek Commlink Entry File (cfile01.cl2) and Meet Entry Report in Word or PDF format on or before Monday, June 8, 2009 by 6 p.m. (Pacific).  
**Full payment with all required items listed in the above Entries Section must be received on or before June 12, 2009.**

b.) Mail/Courier Entries: Full payment with all required items listed in the above Entries Section must be received on or before Monday, June 8, 2009.

**Please mark any courier delivered packages: "NO SIGNATURE REQUIRED".**  
**Entries received after the Entry Deadline will not be accepted.**  
**Updates of entry times will not be accepted.**  
**Phone entries will not be accepted.**  
**DO NOT LEAVE ENTRIES AT THE POOL.**



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- Entry Address:** MHA  
c/o Vicky Brunelle– MHA HJM C Meet  
35 NW 12<sup>th</sup> Street  
Gresham, Oregon 97030  
mhaentries@gmail.com
- Restrictions:** **TOBACCO PRODUCTS OF ANY KIND, ALCOHOLIC BEVERAGES, AND GLASS CONTAINERS ARE NOT ALLOWED IN THE SWIMMING VENUE. NO SKATEBOARDS OR DOGS** are allowed on the MHCC campus. Shaving is NOT permitted in the facility. **Only coaches, swimmers, and work volunteers will be permitted on the deck.**
- Rules:** Current USA Swimming, Inc. and Oregon Swimming, Inc. rules will govern this meet.
- Awards:** Awards will be given for the top 12 finishers in each event.
- Times:**
- |          |   |
|----------|---|
| Saturday | Warm-ups:<br>MHA - 7:00 a.m.<br>General Warm-up – 8:00 a.m. |
|          | Timed Finals: 9:00 a.m.                                     |
| Sunday   | Warm-ups:<br>MHA - 7:00 a.m.<br>General Warm-up – 8:00 a.m. |
|          | Timed Finals: 9:00 a.m.                                     |
- Safety:** Current Oregon Swimming safety guidelines and warm-up procedures will be strictly enforced.
- Timers:** Each team will be given timing assignments. Please encourage timers to report to the head timing area prior to the start of the meet.



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**SATURDAY - JUNE 20, 2009**

General warm-ups start at 8:00 a.m. Timed finals start at 9:00 a.m.

<b>Girls Event #</b>	<b>Event Name</b>	<b>Boys Event #</b>
1	Open 100 Freestyle	2
3	8 & Under 25 Freestyle	4
5	10 & Under 50 Freestyle	6
7	11-12 50 Freestyle	8
9	8 & Under 25 Backstroke	10
11	10 & Under 50 Backstroke	12
13	11-12 50 Backstroke	14
15	Open 100 Backstroke	16
17	10 & Under 100 IM	18
19	11-12 100 IM	20
21	Open 200 IM	22

**SUNDAY - JUNE 21, 2009**

General warm-ups start at 8:00 a.m. Timed finals start at 9:00 a.m.

<b>Girls Event #</b>	<b>Event Name</b>	<b>Boys Event #</b>
23	Open 100 Breaststroke	24
25	8 & Under 25 Breaststroke	26
27	10 & Under 50 Breaststroke	28
29	11-12 50 Breaststroke	30
31	8 & Under 25 Butterfly	32
33	10 & Under 50 Butterfly	34
35	11-12 50 Butterfly	36
37	Open 100 Butterfly	38
39	10 & Under 100 Freestyle	40
41	11-12 100 Freestyle	42
43	Open 200 Freestyle	44



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**MEET ENTRY FORM**

**Mt. Hood Aquatics  
Howard Jones Memorial C Meet Invitational  
June 20-21, 2009**

**Mt. Hood Community College Aquatic Center  
26000 S.E. Stark Street  
Gresham, Oregon 97030**

**TEAM NAME:** \_\_\_\_\_

**TEAM ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COACH NAME:** \_\_\_\_\_  
\_\_\_\_\_

**HY-TEK ENTRY DISK :** YES ( ) NO ( )

**HY-TEK INDIVIDUAL MEET ENTRIES REPORT:** YES ( ) NO ( )  
(If NO is checked, please fill in the following individual meet entries.)

**\*\*All handwritten entries must be legible or are subject to not being entered into the meet.  
INDIVIDUAL MEET ENTRIES (Copy this page if requires more spaces):**

USS ID	NAME	AGE As of 6/20/09	EV#/ TIME	EV#/ TIME	EV#/ TIME	EV#/ TIME	EV#/ TIME	EV#/ TIME
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____



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**MEET ENTRY FORM**

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**26000 S.E. Stark Street**  
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**ENTRY FEE SUMMARY:**

Total Cost of Individual Events (\$2.00 x # of Entries): \$ \_\_\_\_\_  
Total Swimmers (\$6.00 x # of Swimmers): \$ \_\_\_\_\_

**Team Total:** \$ \_\_\_\_\_  
(Checks to Mt. Hood Aquatics)

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**THE FOLLOWING STATEMENT MUST BE SIGNED BY COACH OR TEAM REPRESENTATIVE:**

I have read the meet information and attest that all swimmers entered from my team are members of United States Swimming, Inc.

(Signature of Coach or Meet Representative) \_\_\_\_\_

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

Coach(es) Attending Meet: \_\_\_\_\_

Contact Person Phone #: (\_\_\_\_) \_\_\_\_\_

Contact Person E-Mail: \_\_\_\_\_

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**\*\*Please mark any courier delivered packages: "NO SIGNATURE REQUIRED"**

**\*\*TOTAL ENTRY FEES MUST ACCOMPANY WITH THIS FORM and Make checks payable to:**

**Mt. Hood Aquatics**