



2009 Pacific Swimming Long Course All-Stars -- Selection Process General Rules

1. Pacific Swimming will select two Pacific Swimming Long Course All-Star Teams. Swimmers who apply for a Pacific Swimming All-Star team will be assigned to either the North American Challenge Cup or the Western Zone Championship team. **Swimmers can indicate that they are interested in being selected to only the NACC team.** The NACC is the faster of the two but 11-12s will not swim 50 meter events and therefore more difficult to qualify. Travel dates are the day before and the day after the meet dates.
 2. The co-pay for the WZ Team is **\$995.00**. The co-pay for the NACC is **\$270.00**. A check for the full co-pay amount must be submitted with the application. Swimmers applying for the NACC only should submit a check from \$270.00. Swimmers applying for NACC or Western Zones (assigned by Pacific) should submit two checks, one for \$270 and one for \$995. Checks will not be cashed until after the teams are assigned.
Checks for swimmers not selected to an all star team as well as to a particular all star team will be returned within 10 days.
 3. Qualifying times must be swum between March 1, 2009 and July 26, 2009.
 4. Forms may be submitted as follows:
 - a. Mailed or hand delivered to **Ricky Silva at 4138 Abel Avenue, Palo Alto, CA 94306. phone (650-393-9634) Email rickypasc@yahoo.com** (email preferred.)
 - b. They must be **received by 5:00 pm, Wednesday, July 22, 2009.**
 - c. Hand delivered to the All-Star Selection Desk at the Adam Szmidt Memorial JO Championships hosted in Concord **before finals on Sunday, July 19, 2009.**
- NO late co-pays or forms will be accepted. Make check payable to Pacific Swimming.**
5. These forms will be available on the Pacific Swimming Web site and at the Adam Szmidt Memorial JO Championships.
 6. If you turn in your forms early, you do not need to update your best time. We will have access to meet results of all Pacific sanctioned meets up through July 26th. However, if you have achieved your best time at an out of Pacific swim meet this long course season, you should include a copy of the official results with your entry form.
 7. The burden of proof for any out of LSC meets rests with the swimmer. Submitted results must be either:
 - a. Complete official results of the meet
 - b. Times of the swimmer signed by the meet referee
 8. Selection for the NACC team will be made on the evening of July 27, 2009. Selection for the Western Zone team will be made on the evening of July 28, 2009.
 9. Swimmers who have ever competed in an individual event at the USA Swimming Senior National or US Open Championships are ineligible for the 2009 Pacific Swimming All-Stars.

Pacific Swimming North American Challenge Cup Selection Process

August 4-8, 2009

La Mirada, CA

- 1) A maximum of 80 swimmers will be selected to the team. Age groups 11-12, 13-14, 15-16 and 17-18.
- 2) Swimmers must have a completed entry packet mailed and received or hand delivered to: **Ricky Silva, 4138 Abel Avenue, Palo Alto, CA 94306 by 5 pm, Wednesday, July 22, 2009** to be eligible for the team. An entry packet includes: **letter of intent, medical form, honor code, parent/coach form, co-pay of \$270**. All forms must be signed and completed by the deadline above for the swimmer to be eligible.
- 3) The North American Challenge Cup **will allow** swimmers who have competed at USAS Junior Nationals or have USAS Junior National Times (winter or summer.) Swimmers who have US Open or Senior National qualifying times are not eligible. If you have not achieved a US Open or Senior National qualifying time or competed at the US Open or Senior National Championships within 18 months of the start of the 2008 NACC, you **are** eligible.
- 4) Beginning May 1, 2009, swimmers will be ranked periodically until the deadline based on times swum from May 1, 2009 according to item (5). The top 10 during these ranking periods will be invited to apply to participate in the 2009 NACC. All swimmers who have received an NACC invitation must fill out an application and submit the co-pay to be eligible for the NACC.
- 5) Swimmers who have achieved 6 NACC qualifying times or 1 Summer Junior National time standards in events offered at the NACC meet (for their particular age group) will automatically qualify for the NACC team. If more than 12 swimmers in the same age group and gender automatically qualify and apply, the ten swimmers with the highest selection score will be selected. Events offered are listed below (time standards.)
- 6) Swimmers will be selected based on their best 2009 Pacific Swimming Long Course All-Star Consideration Times (LCCT) achieved from March 1st, 2009 thru July 26th, 2009 in all events swum. Points will be awarded as follows:

Scoring:	1st	2nd	3rd	4th	5th	6th	Place
	11	8	5	3	2	1	Points

In the event of a tie for the final place, the following tiebreakers will be used:

- a. Points earned in the highest placed event.
- b. Potential for the swimmer to improve Pacific's relay placing.

- 7) Once all invited swimmers have been considered and there are at least 4 swimmers per age group, and all the strokes have been considered, if the coaching staff believes that there are no other swimmers with the potential to make finals or help the team's relays, then no other swimmers will be placed on the team, even if it is less than 80 swimmers.

GIRLS 2009 PACIFIC SWIMMING LONG COURSE ALL-STAR CONSIDERATION TIMES				
Event	11-12	13-14	15-16	17-18
50 Free	29.69	28.39	27.79	27.59
100 Free	1:04.29	1:01.59	1:00.09	59.89
200 Free	2:17.99	2:12.79	2:08.79	2:08.29
400 Free	4:50.79	4:37.09	4:30.29	4:30.69
800 Free		9:26.99	9:17.49	9:14.69
1500 Free				
100 Back	1:11.59	1:08.09	1:06.79	1:07.19
200 Back	2:37.69	2:26.49	2:23.79	2:23.99
100 Breast	1:21.59	1:17.89	1:15.79	1:14.69
200 Breast	2:58.19	2:47.99	2:42.49	2:42.19
100 Fly	1:11.09	1:06.89	1:04.99	1:04.19
200 Fly	2:36.89	2:27.19	2:22.29	2:21.39
200 I.M	2:37.29	2:29.99	2:26.39	2:25.09
400 I.M		5:15.89	5:06.79	5:07.99

BOYS 2009 PACIFIC SWIMMING LONG COURSE ALL-STAR CONSIDERATION TIMES				
Event	11-12	13-14	15-16	17-18
50 Free	28.49	26.49	25.19	24.49
100 Free	1:02.49	57.79	55.19	54.09
200 Free	2:15.59	2:05.39	1:59.99	1:57.99
400 Free	4:46.29	4:24.99	4:13.99	4:11.29
800 Free				
1500 Free		17:26.19	16:49.19	16:38.19
100 Back	1:11.79	1:05.09	1:01.79	1:00.49
200 Back	2:34.29	2:20.59	2:12.39	2:12.19
100 Breast	1:19.99	1:11.19	1:09.79	1:08.59
200 Breast	2:55.69	2:39.29	2:33.49	2:28.79
100 Fly	1:09.49	1:02.19	59.29	58.29
200 Fly	2:36.19	2:18.89	2:11.79	2:08.29
200 I.M	2:34.49	2:22.09	2:16.39	2:12.39
400 I.M		5:01.39	4:46.19	4:41.59

Pacific Swimming Western Zone Championship Selection Process

2009 WZ Team, Aug. 3-9, 2009

Oahu, HI

- 1) A maximum of 60 swimmers plus 4 swimmers with disabilities will be selected to the team. Age groups 10/under, 11-12, 13-14, 15-16, and 17-18.
- 2) Swimmers must have a completed entry packet mailed and received or hand delivered to: **Ricky Silva, 4138 Abel Road, Palo Alto, CA 94306 by 5 pm, Wednesday, July 22, 2009** to be eligible for the team. An entry packet includes: **letter of intent, medical form, honor code, parent/coach form, co-pay of \$995**. All forms must be signed and completed by the deadline above for the swimmer to be eligible.
- 3) Eligible swimmers who earn 5 or more WZQTs will be **considered** for the team. If more than 8 swimmers per age group have 5 WZQTs, the coaching staff will select the 6 or more per age group who have the best ability to score at the meet based on compliance with #7 below. If less than 6 swimmers are placed in the age group, then the remainder of the team will be selected by #4-8 below.
- 4) Eligible swimmers with 4 WZQTs are considered according to the points earned in #7 below, regardless of age group. In the event of a tie for the final place, the tie-breaking method in #7 will be used.
- 5) Eligible swimmers with 3 WZQTs are considered according to the points earned in #7 below, regardless of age group. In the event of a tie for the final place, the tie-breaking method in # 7 will be used.
- 6) At least 4 eligible swimmers will be selected to the team in each age group. If fewer than 4 swimmers are selected using #4 above, then the remaining swimmers up to the minimum of 4 will be selected by based on which swimmers can most help the team score.
- 7) In the event of a tie for the final place, the following tiebreakers will be used:
Points are awarded, 1st through 6th place (11-8-5-3-2-1).
 - a. Points earned in the highest placed event.
 - b. Potential for the swimmer to improve Pacific's relay placing.
- 8) Once 4 swimmers have been selected in each age group, each age group will be considered to verify that there is a swimmer from each stroke (fly, back, breast, sprint free, middle distance free, distance free, and IM) represented. If the age group is void in a stroke, then the top point scorer in that age group, in that stroke from #7 above will be considered for the team.
- 9) Once all swimmers who have applied have been considered, there are at least 4 swimmers per age group, and all the strokes have been considered, if the coaching staff believes that there are no other swimmers with the potential to make finals or help the team's relays, then no other swimmers will be placed on the team, even if it is less than 80 swimmers.

Selection Process for Swimmers with Disabilities

- 1) Two swimmers with disabilities who are 12 and under and two swimmers with disabilities who are 13-18 will be selected based on their best long course time achieved. Points are awarded, 1st through 6th place (11-8-5-3-2-1).

GIRLS 2009 WESTERN ZONE QUALIFYING TIMES					
Event	9-10	11-12	13-14	15-16	17-18
50 Free	33.39	29.39	28.89	28.99	29.89
100 Free	1:12.19	1:04.69	1:02.59	1:02.99	1:04.99
200 Free	2:38.89	2:20.69	2:14.99	2:15.79	2:21.09
400 Free		4:56.19	4:43.69	4:45.39	4:59.89
800 Free			9:51.59	9:52.69	10:25.09
1500 Free			18:57.09	19:02.19	20:15.09
50 Back	39.29	34.59			
100 Back	1:24.79	1:14.29	1:11.89	1:12.09	1:17.09
200 Back			2:33.59	2:35.09	2:45.59
50 Breast	44.29	38.59			
100 Breast	1:36.59	1:24.19	1:20.79	1:19.49	1:26.39
200 Breast			2:53.99	2:56.19	3:08.09
50 Fly	36.79	32.39			
100 Fly	1:24.89	1:12.39	1:09.69	1:10.09	1:13.89
200 Fly			2:35.59	2:37.19	2:51.49
200 I.M	2:58.39	2:38.69	2:33.89	2:35.49	2:41.09
400 I.M			5:26.49	5:27.59	5:52.59

BOYS 2009 WESTERN ZONE QUALIFYING TIMES					
Event	9-10	11-12	13-14	15-16	17-18
50 Free	33.09	29.59	27.29	26.39	26.69
100 Free	1:12.69	1:04.19	58.89	57.39	58.29
200 Free	2:37.99	2:19.69	2:08.19	2:05.69	2:07.89
400 Free		4:55.99	4:31.69	4:26.99	4:35.19
800 Free			9:29.99	9:19.99	9:37.69
1500 Free			18:02.79	18:03.19	18:35.19
50 Back	39.49	34.89			
100 Back	1:24.99	1:15.19	1:07.99	1:06.39	1:09.29
200 Back			2:25.79	2:24.09	2:31.29
50 Breast	44.99	38.29			
100 Breast	1:37.79	1:24.39	1:16.29	1:14.39	1:17.29
200 Breast			2:45.79	2:43.29	2:50.99
50 Fly	36.79	32.49			
100 Fly	1:24.39	1:12.79	1:05.19	1:03.49	1:04.89
200 Fly			2:26.89	2:23.79	2:33.59
200 I.M	2:59.49	2:38.89	2:24.99	2:22.49	2:26.39
400 I.M			5:08.29	5:04.59	5:21.79

*Swimmers who are wish to apply for the team should have at least 1 of the time standards listed above. Swimmers who have achieved the times standards above will be **considered** for the Western Zone team.

Letter of Intent

Competition:

2009 Western Zone Championships, Oahu, HI August 3-9, 2009
2009 North American Challenge Cup, La Mirada, California August 4-8, 2009

Please check one:

___ I am applying for the 2009 NACC and 2009 Western Zone Team (assigned by Pacific Swimming)

___ I plan to attend only if selected for the 2009 NACC team (selected by Pacific Swimming)

This signed Letter of Intent, a signed Honor Code, a signed Parent/Coach Guidelines, a completed Medical Release Form, and the non-refundable co-payment of **\$270** must be on file with the Age Group Chair: Ricky Silva **by 5:00 pm, Wednesday, July 22, 2009.**

We request the named swimmer be considered for selection to Pacific's All-Star Team.

Swimmer's Name: _____ Birth Date: _____ Age on 8/4/09: _____

USAS Reg. # _____ Sex: **F M** Swimmer e-mail address _____

Parent/Guardian: _____

Address: _____ City: _____ Zip: _____

Home Phone #: (____) _____ e-mail address _____

Father's Work # _____ Cell # _____

Mother's Work # _____ Cell # _____

Club: _____

Coach: _____ Coach's Phone #: (____) _____

Secondary Contact in Case of Emergency:

Name: _____ Relationship: _____

HomePhone #: (____) _____ Work #(____) _____ Cell#(____) _____

Additional Information:

Shirt Size: YL ___ AS ___ AM ___ AL ___ AXL ___ AXXL ___ Short Size: YL ___ AS ___ AM ___ AL ___ AXL ___ AXXL ___

Lunch Choice: Ham / Turkey / Roast Beef / Vegetarian (Circle one)

Snack Choice: (EX. Teddy Grahms, Animal Crackers, Granola, Fruit, Cereal, etc.) _____

Have you competed in an individual event at: U.S. Open /Junior or Senior National Championships? **Y / N**

If so, when? _____ (Circle One)

AGREEMENT

If selected we agree to participate, to abide by the rules and regulations of the coaching staff, team managers, Pacific's Honor Code and Parent/Coaches Guidelines, and furthermore understand and agree that failure to participate may result in our liability and obligation to reimburse Pacific for expenses incurred on behalf of the swimmer. If not selected, the co-pay will be returned by mail.

Signature of Swimmer

1

1

Signature of Parent/Guardian



Check here if applying as swimmer with disabilities

FAMILY AND U.S.A.S. HOME COACH PARTICIPATION GUIDELINES

Congratulations to you as a major supporter of your swimmer, who is rightfully proud and excited to be applying for a place on this years' Western Zone team. We as the team coaches and managers are looking forward to the coming competition, and are expecting a high level of cooperation and performance from all the athletes on the team. We know you share these aspirations with us.

This is an All-Star Team trip, where our first priority is to promote the best interest of the individual athlete in particular and of the team as a whole. This priority includes safety, fairness of competition for all athletes and the personal growth of each individual in contributing to the team.

You, as a parent and /or coach, have already contributed enormously to the success of your athlete. In order to help and encourage you to continue this support while your athlete is with the Western Zone team we offer you the following guidelines and ask that you sign them. If you have questions please speak to a manager or the Head Coach.

1. Please, if you can, travel to the meet as an official, timer, or spectator. Your personal presence and support is important to the team.
2. All team-housing areas are restricted to trip athletes and staff. Request for access to an athlete's area must be made in writing to the head coach.
3. During the trip family members are asked not to visit with the athletes. The athletes are on the trip to perform to the best of their ability and to become a cohesive team. Team functions are designed with this in mind. Since the schedule must remain flexible the athletes must stay in the team designated areas.
4. Arrangements for telephone calls between the athlete and family/coach should be set up ahead of time, initiated by the athlete and limited to no more than five minutes per call. If you need to get in touch with your athlete please contact a staff member to relay a message (they will be glad to help).
5. The "team area" during competition is restricted to swimmers and staff members. **Parents and home coaches may not be involved with the swimmers on the pool deck.**
7. Any concerns that may arise during the course of the competition need to be referred immediately to the appropriate staff member. They are in place to help the athletes.

I have read and understand the guidelines set for me as a parent/coach.

SIGNATURE _____ **DATE** _____

Emergency Information

Swimmer's Name: _____

IN CASE OF EMERGENCY, WHOM SHALL WE CONTACT:

NAME: _____

EMERGENCY CONTACT PHONE #: () _____
Home-work-cell # (circle one)

Physician: _____ Phone # _____

Dentist: _____ Phone # _____

Medical Insurance: _____ Policy Number: _____

Patient ID# _____

Phone # of insurance company to obtain authorization for emergency treatment (usually an 800 number):

_____ Date: _____
Parental/Guardian Signature

NOTE: Please have swimmer attach their medical card or a copy of their card.

INDIVIDUAL BEST LONG COURSE TIMES

Note: You only need to fill in times achieved out of LSC as we will have a record of your best time in our database if it is achieved in a Pacific sanctioned meet.

Swimmer: _____ Age Group: _____ Club: _____

Address: _____

Home Phone #: (_____) _____

Record best times for all events swum by your age group.

Distance and Stroke	Time	Location	Date	Year
50 Free	_____	_____	_____	_____
100 Free	_____	_____	_____	_____
200 Free	_____	_____	_____	_____
400 Free	_____	_____	_____	_____
800 Free	_____	_____	_____	_____
1500 Free	_____	_____	_____	_____
50 Back	_____	_____	_____	_____
100 Back	_____	_____	_____	_____
200 Back	_____	_____	_____	_____
50 Breast	_____	_____	_____	_____
100 Breast	_____	_____	_____	_____
200 Breast	_____	_____	_____	_____
50 Fly	_____	_____	_____	_____
100 Fly	_____	_____	_____	_____
200 Fly	_____	_____	_____	_____
200 IM	_____	_____	_____	_____
400 IM	_____	_____	_____	_____

Circle your favorite events.



**PACIFIC
SWIMMING**

If you would like your child's participation on the Pacific Swimming All-Stars Teams to be made public prior to the event, please fill out the following information:

I, _____, grant permission for Pacific Swimming to use my
(Print Name)

minor child's name, _____, in conjunction with
(Print Child's Name)

information about the upcoming swim meet, including the date and time of the meet. I will not hold Pacific Swimming liable for any circumstances that may occur as a result of this information being made public prior to the event.

(Parent's Signature)

(Date)