

GRAL SWIM MEET RESULTS COVER SHEET

Division: A Meet Number: 60 Meet Date: 7/18/06

Meet Start Time: 19:56 Date Notified Newspaper: 7/19/06
 Time Relays Completed: 12:20 AM Date Triple/Quad Report Faxed: 7/19/06
 Time Workers Finished: 12:25 AM

FOX HALL vs WELLESLEY
Home Team vs Visiting Team

Meet Location: Fox Hall Circle Pool Length: 25 Yards 25 Meters

Time Measured: 1602 **POOL DEPTH** Method Used to Measure: Metal Yardstick & nylon cord
 Measured By: J. Patrizio

	Lane 1	Lane 2	Lane 3	Lane 4	Lane 5	Lane 6
Start End:	<u>4'</u>	<u>4'</u>	<u>4'2"</u>	<u>4'1"</u>	<u>4'</u>	<u>4'</u>
Turn End:	<u>3'10"</u>	<u>3'11"</u>	<u>4'1"</u>	<u>4'2"</u>	<u>4'</u>	<u>3'11"</u>

Minimum water depth for racing starts in competition shall be measured for a distance of 3' 3 1/2" (1 meter) to 16' 5" (5 meters) from end wall. Record minimum water depth above

Officials:	Official / Team	Official / Team
	1st Half	2nd Half
Referee	<u>J. Patrizio / FH</u>	<u>T. Elliott / FH</u>
S&T Judges	<u>A. Rogers / FH</u> <u>Chris Wolfe / W</u> <u>Patricia Schlegel / W</u> <u>T. Phillips - FH</u>	<u>M.A. Powers - well</u> <u>H. Hamilton - well</u> <u>T. Phillips - FH</u> <u>K. Elliott - FH</u>

Starter: T. Roth - FH M. Kendall - FH

Clerk of Course: _____

Meet Director: P. Bonnevie / FH

Officials "Walking":
 (Indicate Position) M.A. Powers S+T - well
Ken Browne - Ref - well 20 Events
Kim Krøngard - S+T - well

Home Team	SCORE	Visiting Team
<u>581.5</u>	NOVICE	<u>473.5</u>
<u>152</u>	JV	<u>176</u>
<u>143</u>	VARSITY	<u>165</u>
<u>354</u>	SV	<u>102</u>
_____	NOVICE RELAY	_____
_____	SV RELAY	_____
<u>1230.50</u>	TOTAL SCORE	<u>916.50</u>
Home Team		Visiting Team

Referee Signature: TOM ELLIOTT Time: 12:15 AM Date: 7/19/06

The Meet Cover sheet must be mailed to the GRAL Registrar and post marked within 24 hours of meet completion date. The Cover sheets can also be hand delivered to **Jim Spevak** at 12401 Pleasant Run Terrace, Richmond VA 23233.

Greater Richmond Aquatic League Certification Training Form

Name: Holly Hamilton

Club: Wellesley

Date Attended
Clinic:

6-4-06

Strokes and Turns

Date of Meet

Walked IM	<u>7-5-06</u>
Walked Freestyle	<u>6-21-06</u>
Walked Backstroke	<u>6-28-06</u>
Walked Breaststroke	<u>6-21-06</u>
Walked Butterfly	<u>6-21-06</u>
Walked Freestyle Relay	<u>6-28-06</u>
Walked Medley Relay	<u>6-21-06</u>
Called IM	7-5-06
Called Freestyle	<u>6-28-06</u>
Called Backstroke	6-28-06
Called Breaststroke	<u>6-28-06</u>
Called Butterfly	<u>7-5-06</u>
Called Freestyle Relay	6-28-06
Called Medley Relay	<u>7-5-06</u>

*officiated
2nd half
7-18-06*

Starter

Walked _____

Referee*

Walked Starter	_____
Walked Clerk	_____
Walked Referee	_____
Completed Referee Certification	_____

*Date certified as Strokes and Turns Judge _____

I hereby submit this training record for certification of the above named individual for the indicated position(s). All of the dates are verifiable through meet cover sheets signed by the referee of record.

GRAL Club Parent Representative: MA Power 7-18-06
(Signature) (Date)

Please submit to GRAL 1st Vice President.

For GRAL use only

Date certification verified _____ Verified by _____ Re-certification year _____

Greater Richmond Aquatic League Certification Training Form

Name: M.A. Powers

Club: Wellesley

Date Attended
Clinic:

6-6-06

Strokes and Turns

Date of Meet

Walked IM ~~(scribble)~~
Walked Freestyle
Walked Backstroke
Walked Breaststroke
Walked Butterfly
Walked Freestyle Relay
Walked Medley Relay

7-5-06
6-16-06
6-28-06
6-16-06
6-16-06
6-16-06
7-5-06

Called IM ~~(scribble)~~
Called Freestyle
Called Backstroke
Called Breaststroke
Called Butterfly
Called Freestyle Relay
Called Medley Relay

~~(scribble)~~ 7-18
~~(scribble)~~
~~(scribble)~~ 7-18
~~(scribble)~~
~~(scribble)~~
~~(scribble)~~
~~(scribble)~~
~~(scribble)~~
worked second half
7-18

6-4-06

Starter

Walked

7-5-06

1st half except IM
2nd half except Medley Relay

Referee*

Walked Starter
Walked Clerk
Walked Referee
Completed Referee Certification

7-5-06
~~(scribble)~~

*Date certified as Strokes and Turns Judge _____

I hereby submit this training record for certification of the above named individual for the indicated position(s). All of the dates are verifiable through meet cover sheets signed by the referee of record.

GRAL Club Parent Representative: M.A. Powers
(Signature)

7/19/06
(Date)

Please submit to GRAL 1st Vice President.

For GRAL use only

Date certification verified _____ Verified by _____ Re-certification year _____

Greater Richmond Aquatic League Certification Training Form

Name: Tom Shaughness

Club: Wellesley

Date Attended _____

Clinic:

Wellesley
clinic?

Strokes and Turns

Date of Meet

Walked IM	<u>6-21-06</u>
Walked Freestyle	<u>6-21-06</u>
Walked Backstroke	<u>6-21-06</u>
Walked Breaststroke	<u>6-21-06</u>
Walked Butterfly	<u>6-21-06</u>
Walked Freestyle Relay	<u>7-13-06</u>
Walked Medley Relay	<u>6-21-06</u>

Called IM	_____
Called Freestyle	_____
Called Backstroke	_____
Called Breaststroke	_____
Called Butterfly	_____
Called Freestyle Relay	_____
Called Medley Relay	_____

*worked
2nd half
7-13-06*

Starter

Walked _____

Referee*

Walked Starter	_____
Walked Clerk	_____
Walked Referee	_____
Completed Referee Certification	_____

*Date certified as Strokes and Turns Judge _____

I hereby submit this training record for certification of the above named individual for the indicated position(s). All of the dates are verifiable through meet cover sheets signed by the referee of record.

GRAL Club Parent Representative: *W. Power* 7-18-06
(Signature) (Date)

Please submit to GRAL 1st Vice President.

For GRAL use only

Date certification verified _____ Verified by _____ Re-certification year _____

