

**2014 EAST ZONE JR/SR**  
March 7-9, 2014



**CHAMPIONSHIP**  
Binghamton, NY

## **PreMeet Announcement**

- MEET MANAGER** Diana Lenzo  
[didozo@juno.com](mailto:didozo@juno.com)  
155 Kay Road  
Endicott NY 13760  
(607) 727-9871
- Maureen Mueller  
[maureenm@stny.rr.com](mailto:maureenm@stny.rr.com)  
(607) 761-8937
- FACILITY** Maine Endwell High School Aquatics  
714 Farm to Market Road  
Endwell, NY 13760
- POOL SPECS** Length: 75' Width: 60'  
Width: 8 lanes Depth: 12' to 4'  
Distance of water from deck level: 5"  
Entry: deck, 2 dive boards and non-removable start blocks on deck.
- SOUND SYSTEM** Lubell underwater  
4 overhead speakers
- LOCKER ROOM** Mens and Ladies locker rooms will be reserved for changing only.  
Athlete bags will be stored in Athlete area.
- CONCESSIONS** A full line of food will be available during the competition.
- SPECTATOR AREA** Concrete seating to the left of the pool entrance. Handicap accessible with elevator to Pool area and/or cafeteria/concession area.
- ATHLETE AREA** Teams will have reserved space in the cafeteria for team coolers, storage of all athlete bags and land drilling. Gel Station will be available.
- AIRPORT** Binghamton Airport, (BGM) 15 minutes from Pool.
- HOTELS** Please see attached listing of area hotels and rates.

### **TENTATIVE SCHEDULE:**

**Friday, March 7:** 4 pm

**Saturday March 8:** 7am

Zone Awards

EZ Meeting at Host Hotel 7:30pm

**Sunday, March 9:** 8am.

**Awards for Team Trophy**

**THIS FORM MUST BE RETURNED TO RECEIVE FINAL ENTRY MATERIAL**  
**2014 East Zone Championships**  
**Pre Meet Announcement**

All clubs and officials interested in attending should complete the information requested and return the form to Maureen Mueller AND Krista Bessinger ([kbessinger@newcanaanyca.org](mailto:kbessinger@newcanaanyca.org)) by **January 31, 2014** so the appropriate plans can be made.

**NAME OF TEAM** \_\_\_\_\_

**NAME OF HEAD COACH/OFFICIAL** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PHONE - HOME:** \_\_\_\_\_ **WORK:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Please indicate the number of routines you plan to bring in each category:

EVENT JR	Solo	Duet	Trio	Team		
<b>Prelim</b>						
<b>Seeded</b>						
EVENT SR	Solo	Duet	Team			

Please indicate the total number of individuals participating in the following areas:

1. Athletes attending \_\_\_\_\_
2. Coaches attending \_\_\_\_\_
3. Judges attending AND available \_\_\_\_\_
4. Chaperones attending \_\_\_\_\_

**Please return this completed form by JANUARY 31, 2014 to:**  
**Maureen Mueller**  
**9 Lancaster, Endicott, NY 13760 • (607) 761-8937**  
**[maureen.mueller@gmail.com](mailto:maureen.mueller@gmail.com)**