# New England Swimming 2007 Long Course Zone Team

### EASTERN ZONE ALL STAR SWIM MEET

August 8-11 2007

Erie Community College Flickinger Aquatic Center and University of Buffalo Alumni Arena Pool in Buffalo, NY

## **NEW ENGLAND SWIMMING ZONE TEAM:**

# TEAM TRAVEL (10 & UNDER) SWIMMER APPLICATION

Please complete and submit to the verification table at the 2007 New England Long Course Championship Meets.

Address State Zip  Your home e-mail address (All Zone Team correspondence will occur via e-mail)	
Age Birthdate USA Swimming I.D. #  Address State Zip  Your home e-mail address (All Zone Team correspondence will occur via e-mail)  Phone () home cell	
City State Zip  Your home e-mail address  (All Zone Team correspondence will occur via e-mail)	
Your home e-mail address	
Phone ( ) home cell	
CoachClub affiliation	
Suit size Male-regular or jammer (Circle one) Female	
Shirt Size Sweat shirt size Short size	
Swimmers must have a minimum of two (2) Zone long course meters qualifying times order to be considered for the New England Zone Team. Please list the times and ever for which you have qualified as well as the 50 and 100 meter freestyle times (for relay consideration). ONLY long course meter times will be accepted (no converted short course times will be allowed). For verification, please list the USA Swimming sanctio meet at which each time was attained. Swimmers are allowed six events total – no more than three per day, not including relays.  Event 1  Event 2  Event 3  Event 4  Event 5	nts ned
Event 6	

## **Emergency Information**

Every effort will be made to contact parents in the case of injury or an emergency. In the event that a child's parent or guardian cannot be reached, I give permission to the New England coaches and chaperones to act on behalf of my child to seek medical treatment, and hold harmless the above as well as New England Swimming, Inc.

Signature of Parent or Guardian	Date
(If different from above)	Eve. Phone:
Emergency Contact Name: (2 <sup>nd</sup> )	
Day Phone:	Eve. Phone:
Name of Insurance Provider:	
Group #: Police	cy or subscriber #
Questionnaire:  1. Are there any special dietary restric	tions that we should be aware of?
2. Are there any allergy issues that we medication, please contact your coach	e should be aware of? If yes, and your child uses to discuss the issue.
3. Are there any other medication issu	es that the coaches need to be aware of?
4. Are there any underlying medical is	ssues that we should be made aware of?
5. Other concerns?	

### **Waiver of Liability**

I hereby release New England Swimming, together with their operators, agents, employees, consultants, and instructors from any and all claims from injury or damage that may be sustained by me or my child during participation in the Eastern Zone Age Group All Star Swimming Competition.

I represent hereby that my child is in good health and capable of participating on the New England Zone Team and will not do anything which will injure himself/herself or others while engaged in the programs. I will hold New England Swimming harmless in connection with his/her participation.

If an accident or injury occurs, I will give New England Swimming or their representatives permission to obtain medical attention and/or required treatment.

Parents Signature_	
_	
Date	

#### **Code of Conduct**

All swimmers participating on the New England All-Star Zone Team are expected to follow all of the rules and standards set by the coaches and the chaperones while at the Zone Meet.

- 1. All participants must meet the team on deck at least 15 minutes PRIOR to the start of warm-up.
- 2. All participants must check-in with the coaches immediately upon arrival to the pool each day. Participants are not permitted to leave the meet until they have been released by their coaches. Athletes are needed each day for relays and often substitutions from the original meet entry are made based on performance and meet attendance.
- 3. A signed medical release is on file for the participants with the coaches. Any serious medical condition will be communicated to the parents of the participants as quickly as possible.
- 4. Please remember that you are representing New England Swimming and you are expected to present the best possible image of the team at all times. Polite courteous behavior will be enforced at all times.
- 5. There will be a swim vendor and a concessions area away from the pool deck. You are expected to let your coaches know when you leave the deck to visit these areas and you must travel with a buddy.
- 6. All swimmers must wear the New England Team uniform at all times at the pool. Swimmers must wear the team cap, suit, T-shirt, sweatshirt and shorts at all times when at the pool. NO swimmer is allowed to wear any team gear from his or her home club at any time.
- 7. All swimmers are expected to attend ALL sessions of the meet in which they are entered. Swimmers must warm-up at every session and must stay until the session has ended. Swimmers are expected to utilize proper championship meet warm-up and warm-

down procedures for each event, show excellent team spirit at all times, and be role models within the LSC for championship meet behavior.

- 8. All swimmers are expected to follow the requests and rules set forth by the chaperones and coaches, including warm-up procedures and relay order.
- 9. All 10 and younger swimmers and their families are responsible for their own travel planning, lodging and meals and are asked to consider the above guidelines when making your scheduling preparations.

These meet regulations have been set with your safety in mind. We want you, and future participants, to benefit from this experience in the most positive way. By working together and acting responsibly, every participant is assured a wonderful team event. INFRACTIONS OR VIOLATIONS OF THESE POLICIES WILL RESULT IN A SWIMMER RECEIVING DISCIPLINARY ACTION OR BEING SENT HOME EARLIER THAN SCHEDULED AT THE PARENTS EXPENSE.

I have read the policies outlined above and agree to abide by them
Swimmer's signature
I have read the policies and agree with them in their entirety.
Parent's signature

<u>PLEASE NOTE</u>: Swimmers who wish to compete in the Eastern Zone Open Water Swimming Competition may do so at their own expense. New England Swimming will not be responsible for meet entry, staffing or supervision of any kind for this competition.

The <u>deadline for applications</u> for <u>ALL swimmers</u> will be at the conclusion of the 13 and Over Championship Meet at Harvard, on <u>Monday</u>, <u>July 30th</u>, <u>2007</u>. The meet entry deadlines must be adhered to, thus there will be <u>no exception</u> to the swimmer application deadlines.

### TRIP FEE

## \$150.00 per swimmer (10 and younger) traveling with parents

A 10 and younger swimmer who wishes to travel on the team bus may do so ONLY if accompanied by a parent and if room is available on the bus. An additional fee of \$50.00 per person (\$50.00 for the swimmer plus \$50.00 for the parent) will be applied.

Date of receipt: