

To: All Adirondack LSC Swim Clubs

October 1, 2011

Subject: Selection Process and Athlete Application for 2012 Adirondack Short Course Zone All Star Team

Dear Club Contact Person/Coach/Parent Volunteer:

You are requested to share the following information with all of the members of your swim team. Please take the time to disseminate and discuss this information with all of your club members, especially 10 & Under swimmers. Email any questions to JoAnn Faucett at faucettjm@aol.com.

The Eastern Zone Short Course Championship Meet will be held March 29 - 31 (Thursday - Saturday), 2012, at Webster, NY. We will be leaving Wednesday March 28, 2012 and returning Saturday March 31, 2012, AFTER FINALS.

General Qualification Criteria:

1. All athletes must be registered with USA Swimming and Adirondack Swimming for the 2012 swim year.
2. Age qualification for the meet is the swimmers age on the first day of the meet, March 29, 2012.
3. A swimmer must compete in a minimum of two (2) Adirondack Sanctioned Swim Meets plus the 2012 Adirondack District Gold Short Course Championship meet.
4. **Athlete must ride to the meet with the Zone Team (on bus), must travel to and from the pool with the team (on bus), must participate in all team activities (meals, etc) and MUST Stay through the END OF THE MEET.**

Application Process and Qualifying Times:

1. Each swimmer must submit an Application, a Code of Conduct/Emergency Treatment form, an LSC Travel Policy form, an indemnification/release form and a \$100.00 application fee (\$25 non-refundable), to:

JoAnn Faucett, 4 Edwin Drive, Charlton, NY 12019,

on or before March 1, 2012. The full application fee will be applied to the cost of the trip package. A \$75.00 refund will be issued to those swimmers who apply, but do not qualify for the team. Athletes who apply for the team and withdraw from consideration, after March 1, 2012, will not receive a refund. Athletes who do not compete in the 2011 Adirondack District Gold Short Course Championship meet will not receive a refund.

Exceptions will be made only for medical or family emergencies that can be documented.

2. Times achieved at any USA Swimming Sanctioned, Approved or Observed Meet, in an Individual Event or in a Relay Lead Off Leg or a USA Swimming Sanctioned Time Trial, between 9/1/2011 and 3/18/2012, may be used to qualify for the 2012 Adirondack Short Course Zone All Star team (all times MUST be recorded in SWIMS).

If you participate in any Approved or Observed meets which are Not Included in the AD Best Times Report, notify the AD webmaster at bfaucett@adironackswimming.org no later than March 12, 2012. An Official SWIMS Results Report will be obtained and provided to the Age Group Chair for entries.

3. **APPLICATION DEADLINE IS MARCH 1, 2012. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

APPLICATIONS RECEIVED AFTER THE MARCH 1ST DEADLINE WILL BE ACCEPTED WITH THE STIPULATION THAT THOSE ATHLETES MAY NOT DISPLACE ANY ATHLETE WHO HAS APPLIED BY THE DEADLINE OF MARCH 1ST AND MAY SWIM ONLY THOSE EVENTS IN WHICH THEY QUALIFY AND ONLY IF THOSE EVENTS HAVE NOT YET BEEN TAKEN, REGARDLESS OF TIME ACHIEVED

Team Selection Criteria:

For Short Course Zones, each LSC, including Adirondack, are limited to 2 entries per event. The swimmers who have achieved the three (3) fastest times for 12 & unders and the two (2) fastest times for 13 & overs, in each event from 9/1/2011 to 3/18/2012, consistent with the following criteria, will qualify for that event:

1. The qualifying time must be equal to or faster than AA Standard.
2. Swimmers may compete in a maximum of 6 events for this meet (no more than 3 events per day). If a swimmer qualifies in more than 6 events total or more than 3 events on a particular day, that swimmer must declare their events prior to finals on Sunday, March 18, 2012 at the Adirondack District Gold Short Course Championships.
3. The USA-S AD Age Group Chair will determine the final make-up of the team.

Be Prepared to Pay For The Trip at the Mandatory Team Meeting to be held at the conclusion of the Adirondack District Gold Short Course Championship meet on March 18, 2012.

All athletes are required to ride the team bus to and from the meet and to and from the pool. All athletes will stay through the end of the meet...NO EXCEPTIONS. *At no time will a parent take an athlete.* One (1) Parent of each 10 and under swimmer is Required to ride the team bus. Each swimmer may have one (1) parent ride the team bus. *No siblings, friends, etc. may ride the bus.* All athletes are part of the AD Zone Team and Must Purchase the Meal/Hotel Package. All athletes will eat meals at their scheduled times, follow the bus schedule and stay in the hotel with the team. All parents who are part of the AD Zone Team rooming list must purchase the Meal/Hotel Package and follow the meal schedule (*may also ride team bus to and from pool*).

**2012 ADIRONDACK SWIMMING
SHORT COURSE ZONE ALL STAR TEAM APPLICATION**

APPLICATION DEADLINE: March 1, 2012

PLEASE PRINT CLEARLY

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Name: _____ Club: _____

Parent's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: (____) _____ Cell Phone (____) _____

E-Mail: _____

USA-S ID#: _____
(located on your USA-S Membership Card)

Age on March 29, 2012: _____

T-Shirt Size (circle one) Medium Large XLarge

No other T-Shirt Size choices are available. Do not write in sizes.

Speedo Aquablade suit size _____

NOTE: This information will be used to place the equipment orders beginning March 10, 2012.
Please make sure the size information is accurate.

Application Fee: \$100.00

**Make checks payable to:
"Adirondack Swimming"**

Send: Application, Code of Conduct/Emergency Treatment Form and Fee to:
JoAnn Faucett
4 Edwin Drive
Charlton, NY 12019

For AD Use Only

Application and Code of Conduct/Medical Form Received ____/____/____

Paid by Check Number _____ Note _____

ADIRONDACK SWIMMING ZONE ALL STAR TEAM CODE OF CONDUCT

All Zone Team Members are Required to:

1. Ride the Team Bus To and From the meet and To and From the Pool.
2. Stay in the Hotel Reserved for the AD Zone Team.
3. Participate in the Offered Meal Plan (when offered).
4. Stay through the End of Meet.
Failure to stay through the end of the meet will result in being banned from future AD Zone Teams
ONLY 10 & Unders may leave after timed finals on Saturday
5. Wear Team attire while on deck and during all competition.
6. Attend all Team Activities, Meals and Meetings.
7. A nightly curfew will be established, and must be observed by all athletes.
8. PROHIBITED are, possession or use of alcoholic beverages, tobacco and illegal drugs.
9. Inappropriate or destructive behavior is prohibited and will not be tolerated.
10. Disrespect, including sexual harassment or the appearance of sexual harassment, towards any member of our team, or any other team, is strictly prohibited and will not be tolerated.

THE ABOVE CODE OF CONDUCT WILL BE IN EFFECT FROM
THE TIME THE TEAM IS ASSEMBLED UNTIL RELEASE AT THE END OF THE TRIP.

VIOLATIONS OF ANY OF THE ABOVE WILL RESULT IN THE FOLLOWING:

- Immediate dismissal from the team, including sending the athlete home at the athlete's own expense.
- Scratching from further competition.
- Further disciplinary action from the Review Board of Adirondack Swimming.

I have read and understand the above code of conduct and I agree to abide by the above code of conduct while a member of the Adirondack Swimming Zone Team.

ATHLETE'S SIGNATURE: _____ Date: _____

PARENT/GUARDIAN SIGNATURE: _____ Date: _____

PERMISSION FOR EMERGENCY TREATMENT

I HEREBY GIVE PERMISSION TO THE STAFF MEMBERS OF THE ADIRONDACK SWIMMING ALL STAR ZONE TEAM TO SIGN FOR EMERGENCY MEDICAL TREATMENT FOR MY SON/DAUGHTER, DURING THE ADIRONDACK SWIMMING TRIP TO THE EASTERN ZONE CHAMPIONSHIP MEET, IN THE EVENT THAT I CANNOT BE REACHED AT THE TIME OF THE EMERGENCY.

ATHLETE'S NAME: _____

PARENT/LEGAL GUARDIAN SIGNATURE: _____

EMERGENCY TELEPHONE NOs. TO CALL DURING TRIP: _____

CELL _____

INSURANCE INFORMATION

Carrier Name: _____ Tel. No.: _____

ID # _____ Group No.: _____

Adirondack Swimming LSC Travel Policies

Section 1 - USA Swimming Required Travel Policies

Club and LSC travel policies must include these policies. These items are Code of Conduct stipulations in the USA Swimming Rulebook.

- a) Club travel policies must be signed and agreed to by all athletes, parents, coaches and other adults traveling with the club. (305.5.D)
- b) Team managers and chaperones must be members of USA Swimming and have successfully passed a USA Swimming-administered criminal background check. (305.5.B)
- c) Regardless of gender, a coach shall not share a hotel room or other sleeping arrangement with an athlete (unless the coach is the parent, guardian, sibling, or spouse of that particular athlete). (305.5.A)
- d) When only one athlete and one coach travel to a competition, the athlete must have his/her parents' (or legal guardian's) written permission in advance to travel alone with the coach. (305.5C)

Section 2 – Adirondack Swimming LSC Policies

- a) During team travel, when doing room checks, attending team meetings and/or other activities, two-deep leadership is preferable and open and observable environments should be maintained.
- b) During overnight team travel, if athletes are paired with other athletes they shall be of the same gender and should be a similar age. Where athletes are age 13 & Over, chaperones and/or team managers would ideally stay in nearby rooms. When athletes are age 12 & Under, chaperones and/or team managers may stay with athletes. Where chaperones/team managers are staying in a room with athletes, written consent shall be given by athlete's parents (or legal guardian).
- c) To ensure the propriety of the athletes, there will be no male athletes in female athlete's rooms and no female athletes in male athlete's rooms (unless the other athlete is a sibling or spouse of that particular athlete) without an adult present.
- d) A copy of the Club Code of Conduct must be signed by the athlete and his/her parent or legal guardian.
- e) The LSC shall obtain a signed Liability Release and/or Indemnification Form for each athlete.
- f) Team or LSC representatives shall carry a signed Medical Consent or Authorization to Treat Form for each athlete.
- g) Curfews shall be established by the team or LSC staff each day of the trip.
- h) Team members and staff traveling with the team will attend all team functions including meetings, practices, meals, meet sessions, etc. unless otherwise excused or instructed by the head coach or his/her designee.
- i) The directions & decisions of coaches/chaperones are final.
- j) Swimmers are expected to remain with the team at all times during the trip. Swimmers are not to leave the competition venue, the hotel, a restaurant, or any other place at which the team has gathered without the permission/knowledge of the coach or chaperone.
- k) When visiting public places such as shopping malls, movie theatres, etc., 12 & Under athletes will be accompanied by an adult.

By my signature, below, I acknowledge that I have read and understand these policies.

Signature of parent/legal guardian _____ Date _____

Signature of athlete _____ Date _____

or

Coach/Chaperone/Volunteer _____ Date _____

ADIRONDACK SWIMMING LIABILITY RELEASE AND INDEMNIFICATION FORM

I, the undersigned, request voluntary participation for minor travel and participation in the following trip to a USA Swimming event: Eastern Zone Short Course Championship, March 28-31, 2012.

I consent to my minor child’s participation in and travel to and from the USA Swimming/Adirondack Swimming event and related activities and acknowledge that I fully understand that participation and travel may involve risk of serious injury or death, including losses which may result not only from his or her own actions, inactions or negligence, but also from the actions, inactions, or negligence of others. This includes all travel to and from the event arranged by Adirondack Swimming, paid either by the participant or paid or reimbursed by Adirondack Swimming or USA Swimming. I understand that if I have any risk concerns, I should discuss the risks associated with participation with the activity coordinators and event staff, before I sign this document and before travel begins.

Release

In consideration of allowing _____ to participate in and travel to and from USA Swimming/Adirondack Swimming events, I, and on behalf of my minor child, hereby release and hold harmless Adirondack Swimming, members of its board of directors, and its officers, employees, members, volunteers, other participants and agents (collectively, the “Released Parties’), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from the above named minor’s travel to and from and participation in USA Swimming/Adirondack Swimming events and activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I certify that he or she is in good health and has no physical condition that would prevent traveling to and from, or participating in, any USA Swimming/Adirondack Swimming events. Furthermore, I agree to use my/minor’s personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

(Print name of Parent/Guardian) (Signature of parent/guardian) (Date)

Indemnification by Parent/Guardian:

The undersigned parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from the above named minor’s participation in and travel to and from USA Swimming/Adirondack Swimming events and activities.

(Print name of Parent/Guardian) (Signature of parent/guardian) (Date)