

Alaska Swimming All-Star Team

Western Zones 2011
Clovis CA, August 9-13

Potential Zone Swimmer and Family,

Congratulations! If you are reading this application, chances are you are already a very accomplished swimmer. This year's Alaska All Star Team will represent the State of Alaska at the 2011 Western Zones in Clovis, CA, August 9 – 13. Cindy Pitta, Head Coach of Aurora Swim Team, has been selected by the Alaska Swimming Board of Directors to head this year's squad. She is joined by Barbara Bowen, who will be serving as the Zone Manager. Assistant Coaches and additional Chaperones will be selected if needed based on the size of the team. Parents are encouraged to fill out the Chaperone Application at the end of this packet if you are interested in being a chaperone. Please direct any questions you may have to one of these great volunteers for Alaska Swimming.

Cindy Pitta: 907-727-1946, swimasap@gci.net

Barbara Bowen: 907-953-1708, gpbowen@gci.net

Our goal is to put together the most competitive team possible to race against the best Age Group Swimmers in the Western Zone. Selection to the team is made by the Zone Committee. As stated in the Alaska Swim Guide, selection priority is as follows:

- i. Swimmer has 800 or above power points in an event.
- ii. Swimmer achieved a time (either actual or converted) equal or faster than the 8th fastest time (a finalist) in that age group.
- iii. Swimmer achieved a ZPT (top 12 time).
- iv. Swimmer qualified for zones in an individual event.
- v. Swimmer is selected to fill out a relay that would equal a ZPT relay time.
- vi. In the event the age group is exceptionally strong, Zone Coaches have the latitude to increase the number of zone swimmers in that age group, or to rank based on the power point rankings, swimmers selected to the Zone All Star Team.

In addition, additional latitude may be afforded the younger (12 and under) swimmers, as the Western Zone Championships is a higher level championship at the younger age groups.

There is no fee to apply to the zone team. Swimmers will be notified within 2 weeks of the conclusion of JO's whether as to whether they made the team. If selected, swimmers will need to make a \$100 non-refundable deposit by June 1 to reserve their spot. Swimmers must be paid in full for the cost of the trip by July 1. After the conclusion of the meet, Alaska Swimming will reimburse swimmers *up to \$400* based on the available money in the ASI Travel Fund.

Swimmers and parents MUST complete, sign, and date, and submit all of the attached forms by the Zone informational meeting on Sunday, May 1, 5 minutes after the conclusion of the 1000's free's at JO's. Travel information and approximate cost will be shared at this time. If you are not attending JO's, please mail or email the form to me, and must be received by May 2.

Thanks!

-Scott Griffith, ASI Age Group Chair
PO Box 20553
Juneau AK 99802
907-957-1815
glacierswimclub@gci.net

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Swimmer Application

Name: _____ Age (on first day of meet): _____

Address: _____

Birth date: _____

Phone (best contact): _____ Other Phone: _____

E-mail: _____ Email #2: _____

Shirt Size (adult sizes only): _____ Short Size: _____

Parent/Guardian Information

Names: _____

Address (if different from above): _____

Phone numbers (if different from above): _____

Emails (if different from above): _____

Swim Team/Club Information

Team/Club: _____ Coach: _____

Phone: _____ Email: _____

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Medical Consent, Permission to Participate and Release of Liability

I/we _____, the parent(s) or guardian(s) of _____
_____, hereby give my/our consent for, and authorize **Alaska Swimming Inc.** or its agents to give permission for, emergency medical treatment, hospitalization, or other medical treatment as may be necessary for the welfare of the above-named youth in the event of the youth's injury or illness, by a physician, qualified nurse, emergency medical technician, and/or hospital during all periods of time in which the youth is away from his/her legal parents or guardians as a member of **Alaska Swimming Inc.** Further, I/we waive, on behalf of myself/ourselves and the above named youth, any legal claim against **Alaska Swimming Inc.** and its employees, board members, volunteers, or participants, arising out of such medical treatment. Further, I/we will assume the cost of the necessary medical and Hospital care.

I/we understand that swimming is an athletic sport and could result in serious injury, paralysis, or death. I/we, the parent(s) or guardian(s) of the above named youth hereby give my/our approval for him/her to participate in any and all **Alaska Swimming Inc.** activities. I/we assume all the risks and hazards incidental to such participation including transportation to and from the activities; and I/we do hereby waive and release any legal claim against **Alaska Swimming Inc.** and its employees, board members, volunteers, and participants, arising out of any injury to my/our child occurring or resulting from any and all **Alaska Swimming Inc.** activities, whether the result of negligence or from any other cause.

By signing below, I/we acknowledge that I/we have read, understand, and agree to the above.

Signature of Parent or Guardian, Father: _____

Date: _____

Signature of Parent or Guardian, Mother: _____

Date: _____

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Medical Information Form

Name of **Swimmer**: _____

Swimmer's **Doctor**: _____ Phone _____

Medical Insurance

Company Name _____ Policy Number: _____

Group Number: _____

Employee's Identification Number (e.g., social security number), if this is employer provided insurance: _____

Emergency Contact

Name: _____ Phone: _____

List all of the allergies to medications, food, animals, or otherwise that Alaska Swimming Inc. should know about:

List any medical problems, regularly taken medications or other medical history:

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Code of Conduct

The undersigned athlete/staff (coaches and chaperones) participating as a member of the Alaska Swimming All*Star Team understands and will comply with the following guidelines as set forth by Alaska Swimming. Additional guidelines regarding conduct may be presented as needed.

Behavior Guidelines:

1. Each swimmer shall be considerate of his/her teammates, and realize that the reputation of Alaska Swimming Inc. dependent on the behavior of each team member. This purpose of this trip is to provide an experience which will afford a valuable competitive opportunity and experience for the participants. The trip is not intended to be a swimming vacation.
2. A specific daily schedule will be distributed to all swimmers and staff with information concerning warm-ups, curfews, and other pertinent information. If you have any questions, see your Head Coach immediately. At times, because of circumstances beyond our control, the schedules will change. Be prepared for such changes.
3. Punctuality is essential. The team will eat and travel together. Do not inconvenience your teammates by being late.
4. The possession or use of alcohol, tobacco products, controlled substances or non-prescription drugs by any athlete/staff is prohibited. The strictest punishment will be imposed for these infractions.
5. Curfew, as established by the coaches, will be adhered to each day during the entirety of the trip. Lights-out is 30 minutes after curfew. Curfew violators will be reassigned to share rooms with other members or with staff. Curfews are designed to provide you with the rest you need in order to perform at your best.
6. Athletes/staff will attend all team functions including meetings, practices, exhibitions, etc. unless excused by the Head Coach.
7. To insure the propriety of the athletes and to protect the staff, there will be no male athletes in female athletes' rooms and no female athletes in the male athletes' rooms unless the room door is completely open. Only during day time hours before lights out.
8. Damage or theft incurred by the motel or pool facility will be at the expense of the swimmer, with further disciplinary action taken by the staff.
9. Athletes/staff will comply with the uniform requirements as set forth by the coaching staff. Clean and neat attire is required at all times. Team members are expected to exhibit polite and proper attire and behavior at all times.
10. Athletes/staff will refrain from illegal or inappropriate behavior that would detract from a positive image or bring disrespect on Alaska Swimming or be detrimental to its performance objectives.
11. Athletes/staff will display proper respect and sportsmanship toward coaches, officials, administrators and fellow competitors and the public.
12. Athletes will respect and comply with any directions from the chaperones, recognizing the authority of the chaperones as agents of the coaching staff.
13. Any additional guidelines for the Alaska Swimming All*Star Team will be established by the coaching staff.
14. Anyone found in the presence of others partaking in illicit activities will be subject to the same punishments and probable expulsion from the team.
15. Severity of punishment varies with the severity of infraction, the most serious of which is expulsion from the team and being sent home. Expelled members are responsible for all costs incurred as result, including transportation expense.

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Implementation:

- 1) All athlete/staff are appraised in writing of this policy. Signature of the document constitutes unconditional agreement to comply with the behavior guidelines of the Alaska All*Star Team.
- 2) Failure to comply with the Code of Conduct as set forth in this document will result in disciplinary action which may include but is not limited to:
 1. Dismissal from the team and return home at own expense.
 2. Disqualification from one or more events or all events of the competition.
 3. Disqualification from all future Alaska Swimming Inc. activities.

The staff to determine disciplinary action will conduct a hearing. Any appeal made from any disciplinary action shall be done so in accordance with United States Swimming and Alaska Swimming rules and regulations.

Signature of Athlete/Staff: _____

Date: _____

Signature of Parent/Legal Guardian: _____

Date: _____

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Western Zone Training Commitment Form

As a member of the Alaska Swimming 2008 Zone All-Star Team it is my intent to participate in the Western Zone Championships held in Hood River, Oregon. I plan to train with dedication between now and the Zone meet in August in order to achieve the best possible results at the meet. My training plans for this time period are:

Signature of Swimmer: _____

Signature of Parent/Guardian if Swimmer is under 18: _____

Signature of Coach: _____

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Chaperone Application

Name: _____

E-mail Address: _____

Address: _____

Home Phone: _____

Work Phone: _____

Mobile Phone: _____

Team/Club: _____

On the back of this application please write an essay about yourself and include your experience with competitive swimming and any other youth organizations with which you have been involved.

Please include one (1) letter of recommendation.

Please enclose a copy of your driving record as it will be a significant part of your duties as a chaperone.

All Chaperones must be registered members of United States Swimming.

Please include a signed copy of the Code of Conduct.

All of the information in this application is correct to the best of my knowledge.

Printed Name: _____

Signature: _____

Date: _____