**Introduction**

Safety of all participants is the primary goal of this policy. Although competitive experience and enjoyment of members are key reasons for attending travel meets, the needs of safety always come first. USA Swimming and Ohio Swimming policies and regulations take precedence over this policy.

**Section 1 - USA Swimming Required Policies**

These items are Code of Conduct stipulations in the USA Swimming Rulebook.

1. Club travel policies must be signed and agreed to by all athletes, parents, coaches and other adults traveling with the club. (305.5.4)
2. Team managers and chaperones must be members of USA Swimming and have successfully passed a USA Swimming-administered criminal background check. (305.5.2)
3. 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). (305.5.1)
4. 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. (305.5.3)

**Section 2 – Additional Ohio Swimming Policies**

1. During team travel, when doing room checks, attending team meetings and/or other activities, two-deep leadership and open and observable environments should be maintained.
2. Athletes should not ride in a coach’s vehicle without another adult present who is the same gender as the athlete, unless prior parental permission is obtained.
3. 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, they should be the same gender as the athlete and written consent should be given by athlete’s parents (or legal guardian).
4. When only one athlete and one coach travel to a competition, at the competition the coach and athlete should attempt to establish a “buddy” club to associate with during the competition and when away from the venue.
5. To ensure the propriety of the athletes and to protect the staff, 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).
6. A copy of the LSC Code of Conduct must be signed by the athlete and his/her parent or legal guardian.
7. Team or LSC officials should carry a signed Medical Consent or Authorization to Treat Form for each athlete.
8. Curfews shall be established by the team or LSC staff each day of the trip. 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.
9. The directions & decisions of coaches/chaperones are final.
10. Swimmers are expected to remain with the team at all times during the trip.
11. 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.
12. When visiting public places such as shopping malls, movie theatres, etc. swimmers will stay in groups of no less than three persons. 12 & Under athletes will be accompanied by a chaperone.
13. The Head Coach or his/her designee shall make a written report of travel policy or code of conduct violations to the appropriate club (LSC) leadership and the parent or legal guardian of any affected minor athlete.

**OHIO SWIMMING CODE OF CONDUCT**

Code of Conduct for Ohio Swimming athletes governing participation in the LSC Programs

**PURPOSE**

The purpose of this code is to promote individual, team, and program responsibility for the development of first-class citizens.

**PART I – GENERAL CODE OF CONDUCT RULES**

* 1. Team members will display proper respect and sportsmanship toward coaches, officials, administrators, teammates, fellow competitors and the public at all times.
  2. Team members and staff will refrain from any illegal or inappropriate behavior that would detract from a positive image of the team or be detrimental to its performance objectives.
  3. The possession or use of alcohol or tobacco products by any athlete is prohibited.
  4. Use of drugs other than those prescribed by your physician is unacceptable.
  5. Team members will wear designated team apparel during all competition.
  6. Team members at USA Swimming sponsored events shall adhere to any curfews set by the Head Coach.
  7. Male and Female swimmers may not be in each other’s room on any team trip unless supervised by designated LSC official.
  8. Team members and their parents have a responsibility to do their best to ensure that this Code of Conduct is adhered to and to help ensure the safety of these program participants.

**PART II- VIOLATION OF THE CODE OF CONDUCT RULES**

Failure to comply with the Code of Conduct as set forth in this document may result in disciplinary action. At the discretion of the Head Coach such discipline may include, but not be limited to:

1. Dismissal from the trip and immediate return home at the athlete’s expense.
2. Disqualification from one or more events, or all the events of competition.
3. Disqualification from the team and future team travel meets.
4. Financial penalties.
5. Proceedings for an LSC or USA Swimming Board of Review.

I, hereby agree to abide by the rules of conduct as set forth in Part I above and acknowledge that, should I violate any provision in Part I, I will be subject to disciplinary action, as set forth in Part II, including suspension.

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| --- | --- | --- |
|  |  |  |
| Signature of Swimmer |  | Date |
|  |  |  |
| Signature of Parent/Guardian |  | Date |

**Medical Release Form**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Swimmer: |  | Date: |  |

**Parental Consent**

This medical release form must be signed by a parent or legal guardian for EACH swimmer of:

|  |
| --- |
| (Name of Club or Ohio Swimming Inc.) |

If the swimmer is 18 years of age or older, the swimmer must **also** sign this form.

**MEDICAL RELEASE**

|  |
| --- |
| (NAME OF ATHLETE) |

I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF,

IS IN GOOD PHYSICAL CONDITION AND HAS NO CONDITION WHICH WOULD IMPAIR PARTICIPATION IN THE PROGRAM.  IN CASE OF INJURY, I HEREBY GIVE THE OHIO SWIMMING INC., AND IT’S COACHING STAFF PERMISSION TO ACT ON MY BEHALF IN SEEKING MEDICAL TREATMENT FROM ANY LICENSED PHYSICIAN, HOSPITAL OR CLINIC FOR MY CHILD IN THE EVENT THAT SUCH TREATMENT IS DEEMED NECESSARY.  I GIVE PERMISSION TO THOSE ADMINISTERING MEDICAL TREATMENT TO DO SO USING METHODS DEEMED NECESSARY.  I ABSOLVE OHIO SWIMMING INC., AND IT’S COACHING STAFF FROM ALL LIABILITY WHILE ACTING ON MY BEHALF IN THIS REGARD

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| --- | --- | --- |
|  |  |  |
| Participant Signature (if over the age of 18) |  | Parent/Guardian Signature: |
|  |  |  |
| Home Phone: |  | Parents Daytime Phone: |

**If parents are not available, please call the person designated below:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  |  |  |
| Address: |  |  |  |
| City/State/Zip: |  | Phone: |  |
| Relationship: |  |  |  |

Additional comments regarding medical history, allergies, penicillin or drug reactions, etc., which may be needed in rendering medical treatment:

|  |
| --- |
|  |

**Parent/Guardian Insurance Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name: |  | Policy Number: |  |
| Address: |  | Phone: |  |