**2013 SE SUMMER SPLASH**

This meet will be conducted under the auspices of Southeastern Swimming, Inc. of USA Swimming. USA Swimming technical rules and regulations will be followed except fitems specifically addressed in the meet information Sanctioned by Southeastern Swimming, Inc.

Held under the sanction of USA Swimming and Southeastern Swimming, Inc - **SANCTION NUMBER:** ­\_\_\_\_\_\_\_\_\_\_\_\_ **SANCTION NUMBER FOR TIME TRIAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NEW REQUIREMENTS FOR USA SANCTIONING DUE TO COVID 19**

**Covid 19 – Liability Disclaimer**

**An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, senior citizens and individuals with underlying medical conditions are especially vulnerable. USA Swimming, Inc., cannot prevent you (or your child(ren)) from becoming exposed to, contracting, or spreading COVID-19 while participating in USA Swimming sanctioned events. It is not possible to prevent against the presence of the disease. Therefore, if you choose to participate in a USA Swimming sanctioned event, you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.**

**BY ATTENDING OR PARTICIPATING IN THIS COMPETITION, YOU VOLUNTARILY ASSUME ALL RISKS ASSOCIATED WITH EXPOSURE TO COVID-19 AND FOREVER RELEASE AND HOLD HARMLESS USA SWIMMING AND [THE LSC] AND EACH OF THEIR OFFICERS, DIRECTORS, AGENTS, EMPLOYEES OR OTHER REPRESENTATIVES FROM ANY LIABILITY OR CLAIMS INCLUDING FOR PERSONAL INJURIES, DEATH, DISEASE OR PROPERTY LOSSES, OR ANY OTHER LOSS, INCLUDING BUT NOT LIMITED TO CLAIMS OF NEGLIGENCE AND GIVE UP ANY CLAIMS YOU MAY HAVE TO SEEK DAMAGES, WHETHER KNOWN OR UNKNOWN, FORESEEN OR UNFORESEEN, IN CONNECTION WITH EXPOSURE, INFECTION, AND/OR SPREAD OF COVID-19 RELATED TO PARTICIPATION IN THIS COMPETITION.**

HOSTED BY: Fill in name, address and telephone number of host club

LOCATION: Fill in location of swimming facility

FACILITIES: 8-lane, 25 yard competition pool with a 4 foot minimum depth, non-turbulent lane lines and fully automatic Colorado electronic timing system and scoreboard with lane/time/place display.

The meet announcement must include one of the following two statements A or B, and C, D and E:

A) The competition course has been certified in accordance with 104.2.2C(4). The copy of such certification is on file with USA Swimming; or

B) The competition course has not been certified in accordance with 104.2.2C(4).

C) The meet announcement shall include information about water depth measured for a distance of 3 feet 3½ inches (1.0 meter) to 16 feet 5 inches (5.0 meters) from both end walls

D) Use of audio or visual recording devices, including a cell phone, is not permitted in changing areas, rest rooms or locker rooms.

E) Changing into or out of swimsuits other than in locker rooms or other designated areas is prohibited.

F) Operation of a drone, or any other flying apparatus, is prohibited over the venue (pools, athlete/coach areas, spectator areas and open-ceiling locker rooms) any time athletes, coaches, officials and/or spectators are present.

G) **Language for Meet Information**

In your meet announcement you should mention MAAPP. The following is USA Swimming approved language:

Option 1: All applicable adults participating in or associated with this meet, acknowledge that they are subject to the provisions of the USA Swimming Minor Athlete Abuse Prevention Policy (“MAAPP”), and that they understand that compliance with the MAAPP policy is a condition of participation in the conduct of this competition.

Option 2: Current USA Swimming Rules, including the Minor Athlete Abuse Prevention Policy (“MAAPP”), will govern this meet.

H) Starting Sept 1, 2020

 The swimmer must wear only one swimsuit in one of two pieces, except as provided in 205.10.1.  All swimsuits shall not extend above the navel nor below the knees, and for women, shall not cover the neck, extend past the shoulder, nor extend below the knee. No technical suits shall be worn by any 12 and Under USA Swimming athlete member in competition at any sanctioned, approved, or observed meet. Note - 102.8.F

RULES: Current USA Swimming rules will govern the conduct of the meet unless otherwise noted herein.

SWIMMERS: **Any swimmer entered in the meet must be certified by a USA Swimming member-coach as being proficient in performing a racing start or must start each race from within the water without the use of the backstroke ledge. When unaccompanied by a member-coach, it is the responsibility of the swimmer or the swimmer's legal guardian to ensure compliance with this requirement.**

OFFICIALS: Meet Director: Name Referee: Name

Telephone number Telephone Number

Email Address Email Address

ADMINITRATIVE OFFICIAL Name:

ELIGIBILITY: All participants must be USA Swimming registered athletes AND RESIDE IN THE LSC. Entries will not be accepted without CURRENT registration numbers. Coaches and officials must present evidence of certification(card/deckpass) as required by Southeastern Swimming. A swimmer's age on the first day of the meet will determine his or her age for the entire meet.

WARM UP: DEPENDS ON LOCAL PROTOCOL.

STARTING TIMES: Warm-up Competition

Friday PM: 5:00 PM 6:00 PM Saturday AM: 7:30 AM 8:30 AM Saturday PM: Not before 11:00 AM Not before 12:00 Sunday AM: 7:30 AM 8:30 AM Sunday PM: Not before 11:00 AM Not before 12:00 PM

ENTRIES: Teams who have HYTEK'S Meet/Team Manager should submit their entries electronically. E-mailed HYTEK entries will be accepted. Entry forms must be completely filled out including the swimmers’ best times for yards/meters. Please provide a written copy of entries for verification purposes.

DISABILITIES: Swimmers with disabilities are welcome and must complete the Information Form for Disabled Swimmers and return it with the entries.

DEADLINE : Entry data, summary / release sheets, and entry fees including surcharges must be received by the Entries Chairman on or before Tuesday, May 5, 2013. Late entries will be accepted for available lanes only until Sunday, May 6, 2013, until 11:00 AM. No new heats will be formed.

Completed entries should be sent to: Fill in name, address, phone, fax and email.

FEES: $ 3.00 per individual event, $ 8.00 per relay; $ 3.00 per swimmer SES surcharge. Late fees: $ 4.00 per individual event, $ 10.00 per relay. (plus any other fees that were bid for)

Please make checks payable to: Fill in Team Name. All entry fees are nonrefundable.

LIMITS: Swimmers are limited to6 individual events per day, exclusive of relays. Entries will be limited to XXX swimmers per session. The host team reserves the right to limit the number of heats in deck-seeded events in order to run the meet in the allotted time.

MEET FORMAT: This is a PRESEEDED meet. All events will be pre-seeded NO DECK ENTRIES.

SCORING: Points for first through eighth places in individual events will be awarded as follows: 9-7-6-5-4-3-2-1. Points for Relays for first through fourth place will be as follows: 18-14-12-10.

AWARDS: Ribbons will be awarded for first through eighth place in all individual events, and first through fourth places in relay events. High point awards will be given in each age group and gender. Fill in team scoring.

COACHES' CORNER: A coaches' meeting will be held at Fill in time and place. No swimmers will be allowed in the pool during this time. Add: Compliance shall be the responsibility of the Host Meet Referee/director – they may assign the responsibility to other meet personal (ie. Clerk of Course).

here is an example:

"SES rules dictate that “coaches shall display, when requested, their USAS Membership cards to be allowed on deck at any SES sanctioned meet. Compliance shall be the responsibility of the Host Meet Referee/director –they may assign the responsibility to other meet personal. Some phrasing like "Therefore all coaches are required to sign in with the Clerk of Course and/or all coaches  must be prepared to show their coaching credentials(coaches card/deck pass) at any time to the Meet Director and /or the Meet Referee" would suffice. But is up to each meet host as to how they wish to check coaches registration.

OFFICIALS’ CORNER: All officials planning on being at the meet and working some or all sessions should contact the Meet Referee. There will be an officials’ meeting 30 minutes prior to each session.

MEET EVALUATIONS: Please send any comments, suggestions, or evaluations concerning the meet to:

Steven Murry

920 Heritage Way

Brentwood, TN 37027

EVENTS

Event #, Event Name, Gender, Time Standard if applicable.

Recycling:

The LSC recommends, not requires, all meet directors to provide recycling opportunities for plastic bottles and excess paper during swim meets. Additionally, we add to the meet reports turned in by meet directors, three items and a comment item:

1. Was recycling for plastic bottles offered?

2. How many trash bags of recycling were collected?

3. Additional comments about recycling (ease, difficulties, other items recycled?)

Entry Form

Disability Form

Waiver, Acknowledgement and Liability Release Form

**2013 WAIVER, ACKNOWLEDGMENT AND LIABILITY RELEASE**

I, the undersigned coach or team representative, verify that all of the **swimmers** and **coaches** listed on the enclosed entry form/team information are registered and entered into the meet in accordance and subject to USA Swimming Rules and Regulation:

.1 All Clubs, including seasonal clubs, shall ensure that all athletes and coaches participating in USA Swimming sanctioned competition(S) are members of their LSC and USA Swimming.

.2 All coaches of USA Swimming clubs, including seasonal clubs, shall join USA Swimming as coach members and shall satisfactorily compete safety training required by USA Swimming.

And as

False Registration – A host LSC may impose a fine up to $100.00 per event against a member coach or a member club submitting a meet entry which indicates a swimmer is registered with USA Swimming when that swimmer or the listed club is not **properly** registered.

All swimmers, coaches and officials involved with USA Swimming competition must be registered. Additionally, meet directors

I acknowledge that I am familiar with the rules of USA Swimming and Southeastern Swimming, Inc. regarding warm-up procedures and meet safety guidelines, and that I shall be responsible for the compliance of my team’s swimmers with those rules during this meet. The host club, Southeastern Swimming, Inc. and USA Swimming, their agents, officers, representatives, employees and coaches shall be free from any liability or claim for damages for any and all injuries, illnesses or damage to valuables which may be sustained at this meet or while in transit to and from this meet. I also acknowledge that by entering this meet, I am granting permission for the names of any or all of my team’s swimmers to be published on the internet in the form of Psych Sheets, Meet Results or any other documents associated with the running of this meet.

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Signature of Coach or Club Official:

Title:

Club: Date:

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| **Team Information** | | | | | | | | | | | |
| Club Name: | | | | | | | | | Club Initials: | | |
| Address: | | | | | | | | | | | |
| LSC: | | Head Coach: | | | | | | | Cell Phone: | | |
| Contact Person: | | | | | | | | Contact Phone No: | | | |
| Fax No: | | | | | Email: | | | | | | |
| Coaches Attending | | Name: | | | | Cell Phone: | | | | Coaches Expiration: | |
| 1 | | | |  | | | |  | |
| 2 | | | |  | | | |  | |
| 3 | | | |  | | | |  | |
| 4 | | | |  | | | |  | |
| Number of Swimmers Entered: | | | | | Attached: | | | | | | |
| Unattached: | | | | | | |
| Total: | | | | | | |
| **Summary of Fees** | | | | | | | | | | | |
| No. Of SES Swimmers: | | | | x $ 4.00 SES Surcharge = | | | | | | | |
| No. Of Out of SES Swimmers | | | | x $ 4.00 SES Surcharge = | | | | | | | |
| No. Of Individual Events: | | | | x $ X.00 per Event Entry Fee = | | | | | | | |
| No. Of Relays: | | | | x $ X.00 per Relay Event Entry Fee = | | | | | | | |
|  |  |  |  | |  |  | **Total Due = $** | | | | |
| Officials Attending Meet | | | | | | | | | | | |
|  | Name | | | | Certification | | | Email Address | | | |
| 1 |  | | | |  | | |  | | |  |
| 2 |  | | | |  | | |  | | |  |
| 3 |  | | | |  | | |  | | |  |
| 4 |  | | | |  | | |  | | |  |

SOUTHEASTERN LSC

INFORMATION FORM FOR SWIMMERS WITH A DISABILITY

This non mandatory form is for accommodation purposes.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ USA Registration # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age and Birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Events to be swum: \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/

\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/

Type of Disability

Blind \_\_\_\_\_ Cognitive/Intellectual \_\_\_\_\_\_\_\_ Deaf \_\_\_\_Physical\_\_\_\_\_\_\_Other\_\_\_\_\_\_

Extent of Disability: Be specific e.g. totally or partially blind, totally or partially deaf, loss of one or more limbs, multiple disabilities, etc.

The following person(s) will accompany the swimmer for any needed assistance:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accommodations requested, Examples: Lane #, inside lane, starter side preference, assistance to the blocks, water start, hand signals, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Information gathered on this form will only be used for swimmers accommodation during Meet, and forwarded to the SE LSC Disability chair for purposes of evaluation and tracking Swimmers attendance and performance. The Disability Chair welcomes any feedback and or comments concerning your Meet experience.

Meet Director Email:

Meet Referee Email:

Disability Chair Email: robin@seastarsaquatics.org

**CONSOLIDATED ENTRY FORM**

Times should be in **LONG COURSE METERS SHORT COURSE YARDS/METERS**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please duplicate as needed** | | | **EVENT #** | **EVENT NAME** | **BEST TIME** | **EVENT #** | **EVENT NAME** | **BEST TIME** |
| **NAME OF SWIMMER** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **USS REGISTRATION NO.** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **DATE OF BIRTH** | | **SEX** |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |
| **NAME OF SWIMMER** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **USS REGISTRATION NO.** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **DATE OF BIRTH** | **SEX** | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
| **NAME OF SWIMMER** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **USS REGISTRATION NO.** | | |  |  |  |  |  |  |
|  | | |  |  |  |  |  |  |
| **DATE OF BIRTH** | | **SEX** |  |  |  |  |  |  |
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| **NAME OF SWIMMER** | | |  |  |  |  |  |  |
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| **USS REGISTRATION NO.** | | |  |  |  |  |  |  |
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| **DATE OF BIRTH** | | **SEX** |  |  |  |  |  |  |
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| **NAME OF SWIMMER** | | |  |  |  |  |  |  |
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| **USS REGISTRATION NO.** | | |  |  |  |  |  |  |
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| **DATE OF BIRTH** | | **SEX** |  |  |  |  |  |  |
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