



# Open Short Course Swimming Championships 2011

## Event Information Pack

Organised by DSE

Run under IPC Swimming Rules –

(DSE have adopted the IPC Swimming Rules with some additions)

## Championship Information

**Locations:** Ponds Forge International Sports Centre, Sheffield

**Date:** Saturday 26<sup>th</sup> and Sunday 27<sup>th</sup> November 2011

**Sessions:**

Saturday	9:00 am - 1:00 pm
	2:00 pm - 5:00 pm
Sunday	9:00 am - 1:00 pm

**Cost of entry:** £10 per Event

**Closing date for entries to be with DSE: Friday 14<sup>th</sup> October 2011**

**No late entries will be accepted**

**Please return all entry forms to your regional co-ordinator/Team Manager at least 2 weeks prior to the DSE Deadline**

**Entry forms must be fully completed and returned to:**

**National Events Manager**

**DSE**

**Belle Vue Centre**

**Pink Bank Lane**

**Manchester M12 5GL**

**EMAIL: [Jbutler@efds.co.uk](mailto:Jbutler@efds.co.uk)**

# Disability Swimming Conditions

## Championship Information

**Location:** Ponds Forge International Sports Centre, Sheffield, England

- 10 lane 25m pool

**Date:** Saturday 26<sup>th</sup> and Sunday 27<sup>th</sup> November

### *Eligibility – British Competitors*

- All competitors must be registered as members of a swimming club affiliated to the Amateur Swimming Association (ASA) Scottish ASA (SASA) or Welsh ASA (WASA) at the time of entry.
- All competitors must be at least 10 years of age on the 31<sup>st</sup> December 2011 **ALL entries have to have a Category 2 Membership**

### **Functional (S1-S10, SB1-SB9, SM1-SM10)**

- All competitors must have an authorised British Swimming National or IPC Swimming International classification, which is held on the British Swimming or IPC Swimming classification database at the time of entry, with the exception of any athlete undertaking a classification at this competition.

### **Visual (S11-S13, SB11-SB13, SM11-SM13)**

- All competitors must have an authorised British Swimming National or IPC Swimming International classification, which is held on the British Swimming or IPC Swimming classification database at the time of entry. ***Please note you now need to send a copy of your BBS Classification to the The ASA / British Swimming, National Disability Swimming Office, Macclesfield Leisure Centre, Priory Lane, Macclesfield, Cheshire SK10 4AF***

### **Intellectual (S14, SB14, SM14)**

- All competitors must have an authorised UKSA or INAS-FID Registration, which is held on the UKSAPLD database at the time of entry. A photocopy of your registration must accompany the entry form.

### **Deaf (S15, SB15, SM15)**

- All competitors must have an authorised UK Deaf Sport or CISS/ICSD classification, which is held on the UK Deaf Sport or CISS/ICSD classification database at the time of entry.

## Rules

- The event will be held under IPC Swimming Rules. DSE have adopted IPC Swimming with some additions.

## Entries

- Entries must be made on the official form and returned no later than **14<sup>th</sup> October 2011** to: Jannine Butler, DSE, Belle Vue Centre, Pink Bank Lane, Manchester, M12 5GL. Tel: +44 161 953 2499, Fax: +44 161 953 2420, Email: [jbutler@efds.co.uk](mailto:jbutler@efds.co.uk)

- Entries sent without the fee, official entry form or incorrectly completed medical forms will be returned.
- Improved entry times will not be accepted.
- Qualifying times must have been achieved in the 12 months immediately preceding the closing date and may be achieved in either a long course or a short course pool. Times from time trials will not be accepted. Fines may be imposed for competitors who swim outside the qualifying time.
- No refunds will be given if withdrawal occurs within one month prior to the event.
- No late entries will be accepted.
- Entry fees are £10 per event
- Coaches Passes £5 per day
- Packed Lunch is available at an additional cost of £5 per day
- Please note that only Coaches, Team Staff and Authorised Personal Care attendants can apply for accreditations, all other supports can spectate for free, but will not be allowed access to poolside.

### **Withdrawals**

- Withdrawals for the first day's competition must be made by 12:00 on the day before competition starts.
- Withdrawals for subsequent sessions must be made by the end of the last session before the proceeding session of competition.
- Under exceptional circumstances, withdrawals due to medical reasons may be made on the day of competition, up to 45 minutes before the session commences on the official form, which is available from the recorders desk. Failure to do so will incur a **£10** fine for each inappropriate withdrawal.
- Swimmers with any outstanding fines will not be eligible to compete at further DSE competitions until the outstanding amount has been paid.
- Failure to provide notification of withdrawal suspends the swimmer from participation in the remaining events of the competition. In the event that this sanction cannot be enforced at the same championships, an extended suspension may be considered.

### **N.B Reminder to support staff**

- **Support staff shall not coach the competitor while assisting or tapping. If such coaching occurs, the competitor shall be disqualified.**
- **For Functional Classification swimmers, support staff are in place solely to assist the swimmer on entry, exit and at the start and shall not verbally communicate with the swimmer.**

### **Medals**

- Medals shall be awarded for the first 3 placed competitors in each individual classification for each event.
- Team Points will be based on British Swimming Multidisability Swimming Points Swimmers are eligible to score points from a maximum of 4 individual events only.
- Presentations will be made for the team trophy, most outstanding Male and Female competitor will be made at the end of the competition.

### **Accreditation**

- All coaches and personal care attendants must have accreditation. Personal care attendants will only be permitted for swimmers in the following classes: S1, S2, S3, and S11. Such attendants will be excluded from any restrictions and will be given the same accreditation as the swimmer for whom they have personal care responsibilities.
- A swimmer in any of the classes as specified above may have both a coach and a personal care attendant present. The first accreditation will be at a charge of £5 per day. The second accreditation

will be free of charge. All applications for both coaches and carers must be made to Disability Sports Events on the official form supplied. All coaches, chaperones and personal care attendants must conform with the DSE Child and Vulnerable Adult Protection Policy.

### **Doping Control**

- As a condition of entry competitors agree if selected for testing to submit to Doping Control under the jurisdiction of British Swimming.
- The Anti-Doping Rules of British Swimming apply to this event.
- Results management for any Anti-Doping Rule Violation will remain the responsibility of the applicable National Federation.
- The Anti-Doping Rules of British Swimming can be viewed at [www.britishswimming.org](http://www.britishswimming.org) or by writing to British Swimming Limited, SportPark, Loughborough University, 3 Oakwood Drive, Loughborough LE11 3QF
- All athletes under the age of 18 must complete and return the parental consent form included with this information.
- It is the responsibility of each athlete to comply with the Anti-Doping Rules of British Swimming while at this event. In addition, it is the responsibility of each athlete to submit to Doping Control at this event if selected for testing.

**Athletes on the World Class Pathway are responsible for ensuring that they have a valid Therapeutic Use Exemption (TUE) to use any substance that is considered prohibited under the current World Anti-Doping Code Prohibited List.**

**International athletes attending will be required to conform to their own Governing Body procedures regarding TUE's.**

**Other British athletes entering the competition who are tested and require a TUE have 10 working days to apply through British Swimming/UK Sport for exemption. Any costs involved are the responsibility of the athlete and not the Governing Body. This could be around £160.**

**If the athlete already has an approved and valid TUE from the International Paralympic Committee there is no need for that athlete to re-apply to their relevant National Anti-Doping Organisation.**

Further information on doping control, the Prohibited List and TUEs can be obtained from the World Anti-Doping Agency's website: [www.wada-ama.org](http://www.wada-ama.org)

## Programming

### **SATURDAY 26<sup>th</sup> November 2011**

100M FREESTYLE  
50M BREAST STROKE  
100M BACKSTROKE  
100M I.M  
4 x 100m 34 POINT MEDLEY RELAY  
4 x 100m 60 POINT MEDLEY RELAY

100M BUTTERFLY  
200M FREESTYLE  
400M FREESTYLE  
50M BACKSTROKE  
200M I.M.  
4 x 50M 20 Point Medley Relay

### **SUNDAY 27<sup>th</sup> November 2011**

50m BUTTERFLY  
100m BREATSTROKE  
150 I.M.  
50M FREESTYLE

4 x 50M 20 POINT FREESTYLE RELAY  
4 x 100m 34 POINT FREESTYLE RELAY  
4 x 100m 60 POINT FREESTYLE RELAY

### **SESSION 1 at 9:00 am**

GROUP S1 – S15  
GROUP SB1-SB3  
GROUP S6-S15  
GROUP SM5-SM15

### **SESSION 2 at 2:00pm**

GROUP S8-S15  
GROUP S1-S5, S14  
GROUP S6-S15  
GROUP S1-S5  
GROUP SM5-SM15

### **SESSION 3 at 9:00am**

GROUP S1-S7  
GROUP SB4 -SB15  
GROUP SM1-SM4  
GROUP S1-S15

- Competitors in full-time education studying in another region have the option of competing for either region. Competitors who have moved permanently must compete for their new region (where they live now).
- Swimmers are eligible to score points from a maximum of 4 individual events only.
- All events will be heat declared winner (HDW)
- Relays – competitors not entered for an individual event are not permitted to compete in relays.
- Team sheets, in race order, must be submitted to the chief recorder no later than one hour prior to the start of the relevant session for which the event is to be held.

## Timetable

### Friday 25<sup>th</sup> November 2011

7:45 pm Team Managers Meeting – Ponds Forge Sheffield

### Saturday 26<sup>th</sup> November 2011

7:30 am - 8:55 am Warm-up.  
9:00 am - 1:00 pm Morning Session.  
11:30 pm - 2:00 pm Lunch available if purchased for competitors/escorts  
1:00 pm - 1:55 pm Warm-up.  
2:00 pm - 5:00 pm Afternoon Session.

### Sunday 27<sup>th</sup> November 2011

7:30 am - 8:55 am Warm-up.  
9:00 am Morning Sessions  
1:00pm Presentations begin  
Close of Championships.

## Schedule of Warm Up times

### Saturday

7:30 am - 8:55 am	WARM UP	SESSION 1	COMPETITION POOL
1:00 pm - 1:55 pm	WARM UP	SESSION 2	COMPETITION POOL
8:30 am - 5:00 pm	WARM UP/SWIM DOWN		25 MTS POOL

### Sunday

7:30 am - 8:55 am	WARM UP	SESSION 3	COMPETITION POOL
8:00 am - 1:30 pm	WARM UP/SWIM DOWN		25 MTS POOL

## Warm up sessions will be mixed

# Entry Form

Please print clearly.

Name: \_\_\_\_\_

Region/Home Court: \_\_\_\_\_

ASA /SASA /WASA/ Club: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Sex: \_\_\_\_\_

Classification: S \_\_\_\_\_ SB \_\_\_\_\_ SM \_\_\_\_\_

**Please note all S11-S13 swimmers need to send a photo copy of their classification to the British Swimming Disability Office**

INAS / UKSAPLD Registration Number (S14) \_\_\_\_\_

Registration Number: ASA / SASA / WASA \_\_\_\_\_

**All competitors entering must be a member of ASA/SASA/WASA.**

Please indicate which events you wish to enter by submitting times next to the appropriate events.

Event	Eligibility S/SB/SM Class	Time Achieved	Venue where qualified
50M FREESTYLE	S1-S15		
100M FREESTYLE	S1-S15		
200M FREESTYLE	S1-S5, S14		
400M FREESTYLE	S6-S15		
50M BACKSTROKE	S1-S5		
100M BACKSTROKE	S6-S15		
50M BUTTERFLY	S1-S7		
100M BUTTERFLY	S8-S15		
50M BREASTSTROKE	SB1-SB3		
100M BREASTSTROKE	SB4- SB15		
100M INDIVIDUAL MEDLEY	SM5-SM15		
150M INDIVIDUAL MEDLEY	SM1-SM4		
200M INDIVIDUAL MEDLEY	SM5-SM15		

**Please ensure that you are eligible for the events that you have entered and that meet the minimum standards**

**I confirm I am a member of one of the associations above. I accept the terms and condition for the event.**

Signature:.....

Parent/Guardian Signature:..... Date .....

To be signed by the parent/guardian of any competitor under the age of 18 years.



## Team Manager Declaration and Costing Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code \_\_\_\_\_ T No: (Day) \_\_\_\_\_ (Eve) \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Region/ Home Country \_\_\_\_: \_\_\_\_\_

As Team Manager for the above Team I am aware of my duties as Team Manager as stated in the Rules and Procedure Handbook. I will also ensure that all members of my Team are fully aware of the said Notes, Rules and Code of Conduct.

Signed \_\_\_\_\_

Date: \_\_\_\_\_

Pool Pass required for Coach: \_\_\_\_\_

All costs are per person	No. Swimmers in Team	£10 per individual event	£5.00 per person per day Lunch	Cost £5.00	No. of free pool passes
No. Swimmers per team					
SWIMMER £10 per event					
COACHES – POOL PASS Saturday no packed lunch included					
COACHES –POOL PASS Sunday - no packed lunch included					
PACKED LUNCH REQUIRED SATURDAY £5 per person per day					
PACKED LUNCH REQUIRED SUNDAY £5per person per day					
Number of free pool passes requires (in additional to a paid coaches pass) (S1, S2, S3, S4, S11 only)					
TOTAL COST					

### Costing Information

Region/Home Country: \_\_\_\_\_

Please fill in the reply slip below and this will be returned to you as a receipt of your entry forms, A programme will also be sent for checking closer to the championships



Thank you for your form please receive this as confirmation of your entry to the Open Short Course Swimming Championships 2011.

Name and Address:	No. Attending		Total amount enclosed
	Comps	Escorts	
			£
			Signed as received
			_____
		HQ	

# Short Course Swimming Championships 2011

## Male Relay Form

Region/ Home Country .....

SESSION ONE		SESSION TWO	SESSION THREE		
100m MEDLEY RELAY	100m MEDLEY RELAY	50m MEDLEY RELAY	50m FREESTYLE RELAY	100m FREESTYLE RELAY	100m FREESTYLE RELAY
34 Points	60 Points	20 Points	20 Points	34 Points	60 Points
<b>SM6-SM10</b>	<b>SM11-SM15</b>	<b>SM1-SM5</b>	<b>S1-S5</b>	<b>S6-S10</b>	<b>S11-S15</b>

**Only one team per event**

### Relay grouping

- 50mts MEDLEY RELAY - 20 POINTS  
(Backstroke, Breaststroke, Butterfly, Freestyle)
- 100mts MEDLEY RELAY - 34 POINTS, 60 POINTS  
(Backstroke, Breaststroke, Butterfly, Freestyle)
- 50mts FREESTYLE RELAY - 20 POINTS
- 100mts FREESTYLE RELAY - 34 POINTS, 60 POINTS

The teams are based on a point score. The classification of an individual swimmer is worth the actual number value i.e. class S6 is worth six (6) points, class SB10 is worth ten (10) points..

**All relay races are for swimmers of the same sex.**

**Any competitor swimming the breaststroke in a freestyle individual or relay event shall note the following amendment to the rules:**

**1/ When the SB class (i.e. SB7) is lower or the same as the S class (i.e. S7 or S8) the swimmer may swim breaststroke in the freestyle event but the swimmer must maintain the S class.**

**2/ If the SB class (i.e. SB7) is higher than the S class (i.e. S6) the swimmer may only swim in the equivalent higher S class (i.e. S7) for the freestyle relay events.**

# Short Course Swimming Championships 2011

## Female Relay Form

Region/ Home Country .....

SESSION ONE		SESSION TWO	SESSION THREE		
100m MEDLEY RELAY	100m MEDLEY RELAY	50m MEDLEY RELAY	50m FREESTYLE RELAY	100m FREESTYLE RELAY	100m FREESTYLE RELAY
34 Points	60 Points	20 Points	20 Points	34 Points	60 Points
<b>SM6-SM10</b>	<b>SM11-SM15</b>	<b>SM1-SM5</b>	<b>S1-S5</b>	<b>S6-S10</b>	<b>S11-S15</b>

**Only one team per event**

### Relay grouping

- 50mts MEDLEY RELAY - 20 POINTS  
(Backstroke, Breaststroke, Butterfly, Freestyle)
- 100mts MEDLEY RELAY - 34 POINTS, 60 POINTS  
(Backstroke, Breaststroke, Butterfly, Freestyle)
- 50mts FREESTYLE RELAY - 20 POINTS
- 100mts FREESTYLE RELAY - 34 POINTS, 60 POINTS

The teams are based on a point score. The classification of an individual swimmer is worth the actual number value i.e. class S6 is worth six (6) points, class SB10 is worth ten (10 ) points..

**All relay races are for swimmers of the same sex.**

**Any competitor swimming the breaststroke in a freestyle individual or relay event shall note the following amendment to the rules:**

**1/ When the SB class (i.e. SB7) is lower or the same as the S class (i.e. S7 or S8) the swimmer may swim breaststroke in the freestyle event but the swimmer must maintain the S class.**

**2/ If the SB class (i.e. SB7) is higher than the S class (i.e. S6) the swimmer may only swim in the equivalent higher S class (i.e. S7) for the freestyle relay events.**

## Regional Team Manager and Squad Contacts

### EASTERN REGION

Elizabeth Christian

07906 652 511

Email: [elizabethchristian51@btinternet.com](mailto:elizabethchristian51@btinternet.com)

### EAST MIDLANDS REGION

Mary Butler

07970 855 815

Email: [mary-butler@lineone.net](mailto:mary-butler@lineone.net)

### GREATER LONDON REGION

Nick Ibrahim

07803 452 812

Email: [ibrahim\\_nick@hotmail.com](mailto:ibrahim_nick@hotmail.com)

### NORTH WEST REGION

Wendy McNeil

C/O DSE 0161 953 2499

Email: [wendy.mcneil@ntlworld.com](mailto:wendy.mcneil@ntlworld.com)

### NORTH EAST REGION

Kim Craig

07946 296 501

Email: [kimcraig@blueyonder.co.uk](mailto:kimcraig@blueyonder.co.uk)

### NORTHERN IRELAND

Ruth McQuillan

028 903 83829

Email: [ruth@swimulster.com](mailto:ruth@swimulster.com)

### SCOTLAND

Paul Wilson

01786 466 502 / 07809 657 661

Email: [p.wilson@scottishswimming.com](mailto:p.wilson@scottishswimming.com)

### SOUTH EAST REGION

Sue Barker

07746 360 839 / 0239 279 0714

Email: [gospportsue@hotmail.com](mailto:gospportsue@hotmail.com)

### SOUTH WEST REGION

Jo Frith

07810 543 048

Email: [jofrith2@gmail.com](mailto:jofrith2@gmail.com)

### WALES

Huw Griffiths

07917 879 401

Email: [huw.griffiths@swimming.org](mailto:huw.griffiths@swimming.org)

### WEST MIDLANDS REGION

Amanda Kearney

07828 874 778

Email: [amanda\\_kearney@hotmail.com](mailto:amanda_kearney@hotmail.com)

### YORKSHIRE REGION

Graeme Taylor

07919 217 864

[yorkshiredsetm@teamjorvik.co.uk](mailto:yorkshiredsetm@teamjorvik.co.uk)

## Parental consent form for sample collection at doping control

To be completed by the parent/guardian of any athlete under the age of 18 years old.

### The Anti-Doping Rules of the British Swimming

#### Article 5.76 – Testing of minors

I consent to \_\_\_\_\_ (name of athlete) being bound by the Anti-Doping Rules of the British Swimming as a condition of their entry and participation in the Open Short Course Championships 2011. I understand that a refusal to consent may affect the athlete's right to participate in this event.

Name of person that has legal responsibility for the athlete

\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Region / Country code \_\_\_\_\_

# Code of Conduct for Competitors

I am aware that I am an ambassador for my family and my sport and I take full responsibility for my actions. I have read this checklist and understand the guidelines set out below and agree to comply with the following contract.

**I agree that at the Event I will not:**

- 1) possess any prohibited substances or performance enhancing drugs as set out within the national policies adopted by UK Sport and any other Governing Body
- 2) consume alcohol
- 3) smoke
- 4) engage in sexual activity
- 5) use bad language
- 6) tolerate or be involved in discrimination of any kind
- 7) behave in an inconsiderate way towards fellow participants, officials, classifiers, event organisers or venue/hotel staff.

NB. The Event Manager reserves the right to withdraw competitors from the event if they do not keep to the signed contract. We do hope this will not be necessary.

Name (please print).....

Sport:.....

Signature:..... Date.....

**PARENTS'/GUARDIANS' ACKNOWLEDGEMENT FOR MINORS under 18 years of Age.**

In consideration of the Competitor code of conduct:

I/We, the undersigned, being person(s) with parental responsibility for the athlete agree and understand that:

1. The athlete is under the age of 18 years as at the date of signing the Athlete Responsibilities;
2. I/We have read and understood the Athlete Responsibilities and have fully explained to the athlete his/her responsibilities in attending a National Event
3. The athlete has read the Athlete Responsibilities and with our full explanation understands his/her responsibilities in attending the event;

Signed by:

Name of Athlete: .....

Name(s) Parent(s)/Person(s) with parental responsibility

.....  
Signature(s) of Parent(s)/Person(s) with parental responsibility

Date of signing: .....



**CONFIDENTIAL MEDICAL FORM**

**OPEN SHORT COURSE SWIMMING CHAMPIONSHIP 2011**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TEL NO: \_\_\_\_\_

REGION: \_\_\_\_\_

Please complete below if appropriate:

**I CONFIRM I AM SUBJECT TO EPILEPTIC FITS**

MY SPOTTER IS: \_\_\_\_\_

**I CONFIRM THAT DUE TO MY MEDICAL CONDITION I REQUIRE SUPERVISION WHILST IN COMPETITION**

MY COACH/PA IS: \_\_\_\_\_

**I CAN CONFIRM THAT THE ABOVE DETAILS ARE CORRECT AND THAT I WILL INFORM THE ORGANISERS OF ANY CHANGES.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

**PARENTAL CONSENT FORM**

**TO BE COMPLETED BY ALL COMPETITORS UNDER THE AGE OF 18 YRS ON THE FIRST DAY OF COMPETITION.**

Dear Parent/Guardian

It is imperative that the Team Manager accompanying your son/daughter has the necessary authority to obtain any urgent treatment which may be required whilst at the DSE National Competition. Could you therefore please complete the details below and return to your team manager. You are advised to take a copy.

Name:

Date of Birth:

Address:

I, .....being parent/guardian of the above named child hereby give permission for the Team Manager to give the immediate necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signature:

(consent by parent/guardian)

Full Name (Block Capitals):

Date:

Surname..... Forename..... Date of Birth ..... Address:..... .....Postcode:..... Tele: Home: ..... Work:..... Mobile Phone/SMS..... Email:.....	REGION / Home Country ..... MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> COMPETITOR <input type="checkbox"/> STAFF <input type="checkbox"/> GP's Details: Name:..... Address..... Tele:.....	Next of Kin/ Emergency Contact Name: ..... Relationship:..... Address..... ..... ..... Tele: Home..... Tele: Work..... Tele: Mobile.....
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**DISABILITY: (please State) :**

Are you subject to any sudden illnesses, for example, fits, kidney or bladder infection, chest infection that you require urgent treatment? If so, what tablets, injections or treatment do you require?

REGULAR MEDICATION AND DOSAGE (include inhalers) 1	REGULAR MEDICATION AND DOSAGE (include inhalers) 4
2	5
3	6
Allergies (Put 'None' if none known)	Reactions & Symptoms

Vitamins/ Supplements:

Current injuries or medical treatment? Any other relevant information: (if necessary continue on reverse of form)

I confirm the above details are correct and that I will inform the organisers immediately of any changes.

Signature:..... Parent/Guardian Signature:..... Date .....

To be signed by the parent/guardian of any competitor under the age of 18 years.

**DSE is the Events division of the English Federation of Disability Sport**