

POOLE SWIMMING CLUB

Preparing Swimmers, Creating Winners

Founded 1931



POOLE SWIMMING CLUB MINI CAMP & COMP 2017	Venue:	Millfield
Dates: 12/04/2017 – 16/04/2017	Document:	Booking Letter and Forms

1st March 2017

Dear Parents and Swimmers,

Thank you for your interest in booking a place on the Poole Swimming Club Easter Camp. This includes competing at the Exeter City Easter Meet. Please take time to read the following letter, digest the information and return forms as requested to confirm your place.

1. The Team Workforce for the camp will be:

- Lead Coach: Barry Alldrick
- Squad Coach: Jan Hutchings
- Team Manager/ Female Coach/Chaperone: TBC (But will have Team Manager Qualification)
- Team Manager/ Male Coach/ Chaperone: TBC (But will have Team Manager Qualification)

Each member of the Team Workforce will act as a Welfare Representative for the duration of the camp.

This giving athletes choice of who they would be most comfortable with talking to, if necessary.

2. Booking, Medical and Code of Conduct Forms:

Please complete the attached booking form, including medical information and the code of conduct and return to Tracy Hemmings along with the following documents by Friday March 31st. Once the form is completed, it is the responsibility for swimmers/parents/carers to keep us up to date up to the point of travel, this includes emergency contact details.

3. Cost and What This Includes

The camp is currently £350 per swimmer. (Dependant on final numbers this may increase, capped at £375). The price includes travel to and from Millfield School, full board at Millfield School, use of facilities for Long & Short Course training, Strength & Conditioning training and Education Seminars for the duration of the camp and the competition. The cost DOES NOT include competition entry fee's. These will need completing as normal through the Team Unify Website.

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4. Payment & Poole Swimming Club Payment Option

The booking form and full payment must be made to Poole Swimming Club by March 31st 2017. This can be paid by BACS into the following Open Meet account:

Reference: Easter2017

Sort Code: 40-15-27

Account: 51436511

5. Itinerary

The full camp itinerary will be available when all timings are confirmed with Millfield. With the first long course session at 11am.

6. Rooming

Swimmers will be allocated single rooms where possible within the boarding house. The boarding house has communal areas. Details will be forwarded in the confirmation letter.

7. Transport

A coach will leave ASDA Canford Heath at 07.45 on Wednesday 12th April

The coach will return following the competition on Sunday 16th April and will be expected to return between 19.30 and 21.00. Athletes must travel in their Poole Swimming Club kit.

8. Communication

Team Manager 1 Contact Number: TBC

Team Manager 2 Contact Number: TBC

9. Questions or Concerns

If you have any questions prior to booking, please speak or email Jan Hutchings or Barry Alldrick

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10. Equipment List

Kit List (General)

Home Pillow (if room to travel with)

Alarm Clock

Ear Plugs/ Black out masks

Medication (please hand in to team manager on arrival where appropriate)

A bathroom towel

Kit List (Pool)

Kick Board

Pull Buoy

Short Blade Fins

Finger/ Hand Paddles

Snorkel

2 x Drinks Bottles

Competition costume, hats, goggles (Race Night- Practice)

Training costumes, hats, goggles

At least two towels

Kit (Dry Land)

Tracksuit Bottoms/ Shorts

PSC T Shirt

PSC Hoodie/ Tracksuit Top

Trainers (no fashion trainers)

Kit (Workshops)

Notebook/ Pencil Case

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CODE OF CONDUCT

Objective and Scope

The purpose of this document is to establish a set of guidelines and procedures, which outline the responsibilities and behaviour of both staff and swimmers who are attending a meet or camp with Poole Swimming Club. Whilst it is specifically aimed at "away" trips where travel and accommodation are required, it is expected that the principles of the Code of Conduct should be followed at all events and training sessions.

Code of Conduct

Behaviour and Personal Conduct must at all times be of a high standard and reflect favourably on the sport, and the Programme. Language in public or relevant group situations must always be appropriate and socially acceptable.

Any team member who withdraws from the team/squad following selection may be liable, if applicable, for the reimbursement of any costs incurred on behalf of that team member.

Consumption of alcohol is totally forbidden for athletes under age as defined by UK law. It must not be consumed by swimmers or staff members whilst en route, prior to, or following a competition event, training camp or team activities, without specific consent of the Team Manager. During training/competition alcohol is strictly forbidden to all swimmers.

Smoking is prohibited by swimmers and staff whilst en route, prior to, during or following a competition event, training session or team activities.

Personal Appearance shall be appropriate to the circumstances and as indicated by the Team Manager. Team kit and equipment shall be worn as directed by the Team Manager when competing and training, when assembling or travelling, at official team functions or on other occasions as notified.

Attendance at all activities is expected unless agreed by the Team Manager/ Head Coach. Throughout the duration of the trip swimmers should inform staff of their whereabouts within accommodation venues. Strictly no swimmers are to leave accommodation/training/competition venues without the express consent of the Team Manager. Punctuality on all occasions is essential and any curfew must be observed.

Illegal and Performance Enhancing Drugs and Substances are strictly forbidden. Swimmers are expected to be aware of the current list of banned substances and particular care must be exercised if anyone is on medication prior to or during a meet. (cont...)

Illegal Drugs and Substances: The use of these, even though they may not appear on the official banned list in respect of performance enhancing drugs, is nonetheless prohibited.

Accommodation at hotels or equivalent must be as directed by the club staff and at no times must anyone extra be accommodated in swimmers' rooms.

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Phones/Tablets are prohibited from the camp, to allow swimmers to interact with their team mates and coaches. Along with not providing any distractions when trying to recover. Where possible accommodation will be selected where contact to inform parents or arrival will be used. Any phones found will be confiscated and returned to the swimmers parents following the camp.

Medication: It is important that information on all medication being currently taken should be reported to the Team Manager immediately on arrival at camp/event who will report it to the relevant personnel. Allergies to any medication must also be reported immediately to the Team Manager.

Sanctions:

Breaches of the Code of Conduct shall be dealt with in the first instance by the Team Manager or Head Coach. He/she shall report the incident to the Amateur Swimming Association who shall take such further action as is deemed necessary.

In addition, it is expected that all Swimmers, when attending any event or training session shall:

- Comply with the codes, rules and laws within the guidelines set out by the ASA/ Poole Swimming Club.
- Behave without discrimination on the grounds of race, colour, language, religion, birth or social status as set out in the equal opportunities policy.
- Respect the basic human rights, worth and dignity of each member.
- Not encourage swimmers, volunteers, officials or parents to violate the rules of the club/programme or the sport.
- Observe the authority and the decisions of all officials.
- Encourage all swimmers to obey the spirit of the rules and laws both in and out of the pool.
- Treat other competitors and teams with respect, in victory and defeat

Name (please print)

Signed

Date

For members under 12 years

As the parent/carer of the above named member, I hereby confirm that I have explained to them the contents and implications of this Code of Conduct.

Signed (Parent/ Carer) Date

Print Name.....

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Booking and Medical Form for Easter Camp & Comp 2017

Following payment, to ensure accurate information is held, please complete the booking form below and hand to Tracy Hemmings. (or place in the post box to the right underneath of the Notice Board at Rossmore) Please use BLOCK LETTERS.

Athletes Details			
Title (Gender)		Squad	
First Name		Last Name	
Medical Conditions			
Allergies			
Medical Conditions			
Medication Currently Taking			
Doctors Surgery			
Doctors Name			
Doctors Contact No.			
Emergency Contact Details			
Emergency Contact 1 Name:		Relationship to Swimmer:	
Emergency Contact 1 No.	Mobile:	Work:	
Emergency Contact 1 Email:		Home:	
Emergency Contact 2 Name:		Relationship to Swimmer:	
Emergency Contact 2 No.	Mobile:	Work:	
Emergency Contact 2 Email:		Home:	
Accommodation/ Dietary Requirements			
Please detail on an attached sheet any allergies or dietary requirements during your stay			
Checklist of Attached Documents and Payment:			
Sheet explaining further details regarding dietary information, allergies or medical conditions			[]
I have paid £350 into the Poole Swimming Club Meet Account: Reference: Easter 2017 Sort Code: 40-15-27 Account: 51436511			[]
Confirmation of Details and Agreement to Keep Up to date, up to the point of travel			
Name _____ Signature _____ Date: __/__/__			

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Medical Form (Page 2)

Dear Parents / Guardians

Please find attached a medication form for the Easter Camp.

Poole Swimming Club take the health and safety of all our members seriously and to this end have decided to place a member of the coaching staff in charge of storing and administering any medication. This includes all medication, including travel sickness tablets (with the exception of inhalers).

Please complete the bottom section of this letter, place in a clear plastic bag with the medication and hand to Jan Hutchings on the day of arrival.

Thank you for your help and co-operation.

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Medication Form

Please hand in this form and any medication in a clear plastic bag on **the day of departure**

Name of Swimmer

My child will need to take the following medication during the Training Camp

Name of Medication	Condition	Dosage and Time

I agree to a member of Poole Swimming Club administering the medication indicated above.

Signed