

Code of Conduct Form

Swimmer Name: _____

I will:

1. Be loyal to my team, wearing my team kit at all camps/competitions as required by team management.
2. Take direction from coaches and management team at training camps, meets and other team activities and be punctual at all times.
3. Participate in all activities while on training camps and meets as planned by the management team.
4. Treat teammates and opponents with the respect they deserve and as I would like to be treated myself.
5. Display proper respect to management and coaching team.
6. Not take or touch anything that does not belong to me.
7. Conduct myself properly at all times - not do anything that might cause harm to my teammates or myself.
8. Not possess, sell, or take alcohol, tobacco or any non prescribed drugs.
9. Refrain from inappropriate physical contact.

Conduct at away meets and training camps.

- At no time will male and female swimmers be in the same room together without an adult chaperone. This applies to team members and members of other teams.
- No team member may be out of their room after curfew. Curfews are set by the management team.
- Any damages incurred at the swim meet or the accommodation will be at the expense of the swimmer or parent/guardian.
- No loud or boisterous behaviour will be allowed in foyers or hallways of accommodation and it will be kept to a minimum in rooms.
- All calls will be made on mobiles, credit card or call collect.
- If swimmers have any problems or difficulties they should feel free to approach the management team in confidence where these problems or difficulties may be resolved.
- If swimmers have any problems or difficulties with any of the management team, they should discuss it with the team captain or with another member of the management team.

The Team Management has the authority to deal with all disciplinary matters and the duty to impose penalties. These may include withdrawal from further competition / camps or sending home of swimmers. Serious breaches of this Code will be reported to the Connacht Management Executive, who may take further action including exclusion from all further Connacht Squad activities. If a serious breach of this code occurs after curfew, the Team Manager will ring the contact phone number of the swimmer(s) parent/guardian and ask for the swimmer(s) to be removed from the camp immediately.

I have read and understand the Code of Behaviour.

I understand that any breach of this code of behaviour by me will be taken very seriously.

Swimmer Name: _____ Date: _____

Athlete Signature: _____

Parent/Guardian Signature (for under 18s): _____

Parent/Guardian Contact Number(s) for duration of Camp: _____

Medical Information & Consent Form

To be completed by the parent(s) / guardian(s) of all swimmers under and over 18 years of age

CAMP OR EVENT INFORMATION

| | |
|-----------------------------|--|
| Event Details (Gala / Camp) | |
| Venue | |
| Date | |

PERSONAL INFORMATION

| | | | |
|----------------------------|--|---------------------------|--|
| Athlete Name | | Date of Birth | |
| Parent / Guardian Name | | Contact Mobile Number | |
| Parent / Guardian Name (2) | | Contact Mobile Number (2) | |
| Parent Email Address | | | |
| Club Name | | Club Coach | |
| Address | | | |

MEDICAL INFORMATIONⁱ

Please detail any recent injuries or illness experienced which have affected the swimmer's training in the month leading up to the camp/competition/event:

Does your child have any specific medical conditions requiring medical treatment and/or medication?
 Yes No If yes, please give details.

Does your child have any food, drug or other allergies? Yes No If yes, please give details.

Does your child have any specific dietary needs? Yes No If yes, please give details.

I/We confirm that _____ (name of swimmer) is of good health and injury free and fit to take a full and active part in the camp/competition indicated above.

Signed _____ Swimmer Date: _____

Signed _____ Parent (if swimmer under 18) Date: _____

Signed _____ Home Coach Date: _____

NOTE: If attending this form should be handed to the Team Manager on arrival. This form should be completed no earlier than 3 days before the start of the camp.

This information is collected, stored and used in line with the Data Protection Act 1998& 2003. Parents / Guardians should be assured that Connacht Region Swim Ireland is committed to compliance with the Data Protection Act.

ⁱ If on medication you may need to obtain a THERAPEUTIC EXEMPTION FORM – contact Anti-Doping Unit, Irish Sports Council, for further details.