



## **DORSET COUNTY ASA**

### **2010 DORSET COUNTY MASTERS & SENIOR AGE GROUP CHAMPIONSHIPS**

Under ASA Laws and Technical Rules

#### **General Conditions:**

1. Swimmers competing in any other County Association's Championships in the same year are not eligible to compete in the 2010 Dorset County Masters & Senior Age Group Championships.
2. The following conditions will apply to all swimmers entries:
  - a. All competitors must submit an ASA registration number and have been registered through their Club as an ASA Category 1 or Category 2 swimmer.
  - b. Any medical conditions must be declared on a Health Information Form. The Declaration shall be made for the sole use of those persons with responsibility for health and safety during the Competition. The content of the declaration will remain confidential.
3. Clubs/individuals will receive a confirmation of accepted entries prior to the Competition, the details of which should be checked and any discrepancy notified to the Meet Co-ordinator immediately. Any rejected entries will be listed.
4. The Competition will run with pre-seeded heats. No entry cards will be issued and no secondary registration on the day is required.
5. All entries must be received by the applicable closing date together with the correct entry fee. Cheques should be made payable to Dorset County ASA.
6. No refunds will be made for withdrawals after the closing date unless on medical grounds for which a doctor's certificate will be required.
7. Any swimmer or coach requiring wheelchair access MUST ensure that the relevant leisure centre approves this in advance and a personal evacuation plan agreed and submitted to the Promoter for passing to the Referee prior to the start of the gala.
8. The Promoter reserves the right to alter or amend the Programme. In the event of any major alteration Clubs will be informed accordingly.

#### **Entry Conditions & Information**

##### **1. Dates**

- a. Block 1 (800/1500m only): Saturday 20 February – closing date Saturday 31 January (midday).
- b. Block 2: Sunday 21 March – closing date Saturday 27 February (midday).

##### **2. Age Groups**

- a. Age groups will be based on age as at 31 December 2010.
- b. Masters competitors must be aged 25 years or over at midnight on 31 December in the year of competition.
- c. Senior Age Group competitors must be aged 18 years or over on the first day of the Championships and under 25 years at midnight on 31 December in the year of competition.
- d. Age groups for individual events will be:  
S – 18-24; A – 25-29; B – 30-34; C – 35-39; D – 40-44; E – 45-49; F – 50-54; G – 55-59; H – 60-64;  
J – 65-69; K – 70-74; L – 75-79; M – 80-84; N – 85-89; P – 90-94; Q – 95-99.
- e. Age groups for team events will be a total age of 120+ years and 180+ years.

### **3. Entry fee**

- a. Individual events - £5.00 per event.
- b. Both 800m and 1500m swum as 1500m Freestyle - £7.50.
- c. Team events - free.

### **4. Events**

This Competition is run as an Integrated Competition. Entries will be seeded on submitted times, the slowest time swimming first. Disability swimmers will compete in the appropriate time ranked heat.

#### **a. Individual events**

- i) All events will be Heat Declared Winner (HDW). There will be no finals.
- ii) All 200m events and the 400/800/1500m Freestyle will be swum as mixed time-seeded heats.
- iii) The heats for 800m and 1500m Freestyle events will be limited to the gala time available. To maximise the number of entries accepted the 800 m and 1500m events may be swum simultaneously.
- iv) Swimmers wishing to enter both 800m and 1500m Freestyle events will compete in the 1500m Freestyle with an official time recorded at 800m for the purposes of awards for that event. Swimmers entering both events MUST complete the full 1500m to receive a time, points and award at 800m. Failure to complete the full 1500m will result in disqualification from both events.
- v) Swimmers entered in the 1500m Freestyle only cannot be credited with points or an award from their swim at 800m. Swimmers entered in the 800m Freestyle only cannot go on to swim the 1500m distance and be credited with points or an award for that event.
- v) A competitor entered in the name of one club in individual events may not compete in the name of another club in team events.

#### **b. Team events**

- i) Clubs may enter teams in both age groups but are limited to one team per age group per event.
- ii) Mixed teams shall consist of two competitors of each sex swimming in any order.
- iii) Team events may be swum in continuous series, not with separate heats by age group, as time permits.

#### **c. Disability**

Swimmers with a registered Functional Ability Card or Certificate of Swimming Disability may submit entries and will be accepted as time permits. The details of Functional Ability/Disability classification should be declared along with an entry time. The card or certificate must be presented to the Referee before any swim to which it applies.

### **5. Entry Times**

Qualifying or consideration times have not been set for this competition. Entries will be accepted into the competition as time permits.

### **6. Awards & Presentations**

There will be no formal presentation of individual awards. Swimmers may collect awards from the Presentation Table once the results have been published.

- a. Age Group medals for HDW events will be awarded for top three placed competitors in each of the designated male and female Age Groups.
- b. Ribbons for relay events will be awarded for first, second and third places in each of the Age Groups.
- c. For swimmers presenting a Functional Ability Card or a Certificate of Swimming Disability medals will be awarded to the top three placed competitors per event. Placing shall be determined on a multi-disability basis to the three swimmers who either break the World Record by the greater amount or are nearest to the World Record within their own classification. If less than four swimmers participate in any one event then a minus one ruling shall apply. Where only one swimmer participates in an event, then the swimmer shall be awarded a medal provided they better their entry time.
- d. An award for the 'Fastest Swim of the Championships' based on GB points for the single fastest female and single fastest male swim will be presented at the end of the Championships.

- e. An award for the 'Best Female Swim of the Championships' and 'Best Male Swim of the Championships' based on the time closest to the Masters World Record for that event/age group will be presented at the end of the Championships.
- f. A trophy for 'Top Masters Club' calculated from Club Team Points will be presented at the end of the Championships.

### **7. Club Team Points**

Points will be awarded for Team Relays and for all individual swimmers placed first to six in their respective Age Groups as follows: 1<sup>st</sup> place = 6 points descending to 1 point = 6<sup>th</sup> place. Team Points will be displayed at strategic times throughout the Competition.

### **8. Spectators**

Entry will be free and subject to the limit of accommodation at the respective venue.

## 2010 ENTRY FORM – DORSET COUNTY ASA MASTERS

<b>COMPETITOR</b>				<b>CLUB</b>			
<b>Address:</b>				<b>Tel:</b>			
<b>Date of birth</b>				<b>Email:</b>			
		<b>M / F</b>		<b>ASA Number</b>			
<b>Health Declaration to be submitted</b>		<b>Y / N</b>		<b>Functional Ability/Disability declared</b>			<b>Y / N</b>
<b>Event</b>	<b>Entry Time</b>		<b>Event</b>		<b>Entry Time</b>		
<p><b>Littledown – Saturday 20 February 2010</b></p> <p><b>Long distance events (800/1500m Freestyle only)</b></p> <p>Warm-up: 17.30 (tbc)      Start: 18.00 (tbc)      Estimated finish: 19.30 (tbc)</p>							
<b>Event</b>		<b>Entry fee</b>		<b>Entry time</b>			
Male/female 800m Freestyle		£5.00					
Male/female 1500m Freestyle		£5.00					
Male/female combined 800/1500m Freestyle		£7.50					
<p><b>Note: Please refer for Rules 4(iii) to 4(v) inclusive of the 2010 Entry Conditions before entering these events</b></p>							
<p><b>Certification:</b></p> <p>◆ I am an eligible competitor and hold the necessary birth, residential or membership qualification as currently required by the Dorset County ASA General Competition Conditions available in the ASA SouthWest Region Handbook.</p> <p>◆ To the best of my knowledge I am physically fit and able to participate in Masters events and acknowledge that Dorset County ASA cannot be held responsible for any liability or injury to me as a result of a medical condition.</p>							
<b>SIGNATURE</b> _____				<b>DATE</b> _____			
<ul style="list-style-type: none"> <li>• <b>One entry form per swimmer</b></li> <li>• <b>Ages as at 31 December 2010</b></li> <li>• <b>Closing date Saturday 31 January 2010</b></li> </ul>		<b>Entries = £</b>		(cheques payable to DCASA)			
<p><b>ENTRY FORM TO BE RETURNED TO:</b></p> <p>(entry confirmation for entries submitted without an SAE will be returned en bloc to home club)</p> <p>Di Gibbs, 22 Stibbs Way, Bransgore, Christchurch, Dorset BH23 8HG. Tel 01425 673512      Email digibbs@talktalk.net</p>							

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<b>Address:</b>				<b>Tel:</b>			
<b>Date of birth</b>				<b>Email:</b>			
		<b>M / F</b>		<b>ASA Number</b>			
<b>Health Declaration to be submitted</b>		<b>Y / N</b>		<b>Functional Ability/Disability declared</b>			<b>Y / N</b>
<b>Event</b>		<b>Entry Time</b>		<b>Event</b>		<b>Entry Time</b>	
<b>Rossmore - Sunday 21 March 2010 Session 1</b>				<b>Rossmore - Sunday 21 March 2010 Session 2</b>			
Warm-up: 12.30		Start: 13.00		Estimated finish: 15.30		Warm-up: 16.30	
				Start: 17.00		Estimated finish: 19.30	
400m Freestyle				200m Freestyle			
200m Breaststroke				100m Breaststroke			
100m Ind. Medley				50m Butterfly			
50m Backstroke				200m Ind. Medley			
200m Butterfly				100m Backstroke			
200m Backstroke				100m Butterfly			
100m Freestyle				50m Freestyle			
50m Breaststroke							
<b>Plus Team Relays (4x50m):</b>				<b>Plus Team Relays (4x50m):</b>			
<ul style="list-style-type: none"> <li>• Female and male Freestyle 180+ years</li> <li>• Female and male Medley 120+ years</li> <li>• Mixed Freestyle 180+ years</li> <li>• Mixed Medley 120+ years</li> </ul>				<ul style="list-style-type: none"> <li>• Female and male Medley 180+ years</li> <li>• Female and male Freestyle 120+ years</li> <li>• Mixed Medley 180+ years</li> <li>• Mixed Freestyle 120+ years</li> </ul>			
<b>Certification:</b>							
<p>◆ I am an eligible competitor and hold the necessary birth, residential or membership qualification as currently required by the Dorset County ASA General Competition Conditions available in the ASA SouthWest Region Handbook.</p> <p>◆ To the best of my knowledge I am physically fit and able to participate in Masters events and acknowledge that Dorset County ASA cannot be held responsible for any liability or injury to me as a result of a medical condition.</p>							
<b>SIGNATURE</b> _____				<b>DATE</b> _____			
<ul style="list-style-type: none"> <li>• One entry form per swimmer</li> <li>• Ages as at 31 December 2010</li> <li>• Closing date Saturday 27 February 2010</li> </ul>		Entries <input style="width: 40px; height: 20px;" type="text"/>		@ <b>£5.00 per event</b>		= £ _____	
				(cheques payable to DCASA)			
<b>ENTRY FORM TO BE RETURNED TO:</b>							
(entry confirmation for entries submitted without an SAE will be sent en bloc to home club) Di Gibbs, 22 Stibbs Way, Bransgore, Christchurch, Dorset BH23 8HG. Tel 01425 673512 Email digibbs@talktalk.net							

## 2010 ENTRY FORM – DORSET MASTERS TEAM RELAYS

**Club**

**Signed** (Club official)

\_\_\_\_\_

**ENTRY:**

Please tick the appropriate boxes to indicate the number of teams competing and provide competitors names (maximum of 4) in the order of swim for each relay event entered.

**Female Teams**

Freestyle 120+ years		Freestyle 180+ years		Medley 120+ years		Medley 180+ years	

Team 1

Team 2

Team 3

Team 4


**Male Teams**

Freestyle 120+ years		Freestyle 180+ years		Medley 120+ years		Medley 180+ years	

Team 1

Team 2

Team 3

Team 4


**Mixed Teams**

Freestyle 120+ years		Freestyle 180+ years		Medley 120+ years		Medley 180+ years	

Team 1

Team 2

Team 3

Team 4


**ENTRY FORM TO BE RETURNED TO:** (please enclose an SAE)  
 Di Gibbs, 22 Stibbs Way, Bransgore, Christchurch, Dorset BH23 8HG.  
 Tel 01425 673512 Email digibbs@talktalk.net

## HEALTH INFORMATION FORM

**NAME** \_\_\_\_\_ **CLUB** \_\_\_\_\_

**DOB** \_\_\_\_\_ **HOME TEL:** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

### 1. Emergency contact information during 2010 Competitions:

Name of emergency contact: (1) \_\_\_\_\_ (2) \_\_\_\_\_

Relationship to swimmer: (1) \_\_\_\_\_ (2) \_\_\_\_\_

Contact Mobile Number: (1) \_\_\_\_\_ (2) \_\_\_\_\_

**Health information** will be held by the Promoter and shared with officials running the Competitions but otherwise kept confidential.

**Do you have any health conditions?** (e.g. asthma; tendency to hyperventilate; epilepsy; heart conditions) **YES / NO**

If you answered Yes please give details: \_\_\_\_\_

**Do you take any regular medicines?** (e.g. Ventolin inhalers) **YES / NO**

If you answered Yes please give details: \_\_\_\_\_

**Are any of your medicines on the banned list as per the ASA Anti-Doping Guidelines?** **YES / NO**

If you answered Yes please give details: \_\_\_\_\_

**NOTE: The use of all prescribed/self-prescribed medication should be registered with the ASA. The therapeutic use of a banned substance should also be registered with the Dorset County Secretary.**

**Do you have any intolerances or allergies?** (e.g. nuts, penicillin) **YES / NO**

If you answered Yes please give details: \_\_\_\_\_

**Who looks after your medicines?** **SELF / Team Manager**

### 2. Functional Ability Card or Certificate of Swimming Disability

- I have a Functional Ability Card / Cert. of Swimming Disability (delete as appropriate) and my category is \_\_\_\_\_
- I will present my card/certificate to the Referee before those races to which it applies

Signed: \_\_\_\_\_

### 3. Parental Permission for competitors under 18 years of age:

Name of parent/guardian (print) \_\_\_\_\_

I give DCASA staff appointed for the 2010 Competitions permission to act in *loco parentis* if required in an emergency situation. I understand that DCASA will contact me at the earliest opportunity and I have provided a current emergency contact number.

Parent/guardian (sign) \_\_\_\_\_ Date: \_\_\_\_\_

### 4. Photography

Tick this box if you DO NOT wish to be photographed during the meet.