

2010 Pacific Northwest Swimming Zone Team

Athlete's Application Packet

(Updated June 21, 2010)

NOTE: The athletes and their parents are encouraged to work on the application as soon as possible. **Don't wait until the last minute. It will take some time to pull all of the required information together and complete the application.** Each item on the Summary Check-Off Page must be "checked off" and included with the application. Parents and athletes, be sure to sign all of the appropriate and required forms in the designated places. Starting this year it is required that a physician sign off that an athlete can participate in Zone meet.

Please be complete with the requested information. With the size of the team there is simply not enough time at the last minute to "chase" down each athlete's parents who did not provide a complete application packet for their athlete.

If you have questions, you can direct them to the Head Coach.

Best Regards,

Tom Wunderlich
Zone Team Head Coach
425-418-6016 (C)

Application Deadline: July 12, 2010 at 12:00 Noon. Application must be in the PNS office.

Qualification Deadline: July 18, 2010. Note: PNS Champs is too late to achieve an athlete's first (1st) event qualifying time.

2010 Pacific Northwest Swimming Zone Team

Overview of the Approach for the 2010 Zone Meet

(Updated June 21, 2010)

Important Rules and Guidelines:

- (1) An athlete's application is due in the PNS office on the date specified. No exceptions for late applications.
- (2) The deposit of \$75.00 is needed to cover the cost of that apparel package, should an athlete decide not to go on the trip if they had already achieved one or more qualifying times and were selected by the coaching staff to be on the 2010 Zone team. There could be additional charges to the parents if an athlete, once selected, then withdraws for items like entry fees, team picture, Saturday night social event, and other committed costs.
- (3) This \$75.00 deposit will be refunded to the athlete's parents after the trip has been completed.
- (4) PNS is subsidizing each of the athletes to cover their apparel package, entry fees, team picture, two teams swim caps, and Saturday night social event which includes dinner. The cost of renting the pool for team workouts at Colman Pool at Lincoln Park in West Seattle will also be covered by PNS.
- (5) As mentioned above, start working on the application as soon as you can, as it will take some time to get everything filled out.
- (6) There will be 3 PNS coaches at the meet. They will be responsible for the managing the athletes during the meet. Parents are required to be at the pool any time their athlete(s) is at the pool in case there is an emergency that needs their attention.
- (7) It is the athlete's responsibility to be "in the right spot at the right time". The coaches will not have time to "track down" an athlete who is not where they should be.
- (8) It is expected that the athletes during the meet will sit in the team designated area, unless directed by the head coach to do otherwise.
- (9) Athletes need to check "in" and "out" with the coaches for each and every session, so the coaches know that all of the athletes are there for their events, particularly the relays.
- (10) If an athlete fails to check in with the coaching staff, the head coach, may at his discretion remove that swimmer from the relay(s).
- (11) The athlete's parent(s) will need to attend the "required" practice at Coleman Pool so they can pick up their athlete's apparel package. Coaches will not bring apparel packages to California. The only option will be for the parent to drive to Snohomish and pick it up from the head coach prior to Saturday, August 8, 2010.

2010 Pacific Northwest Swimming Zone Team

Team Selection Process

(Updated June 21, 2010)

Summary:

The 2010 PNS Zone team will have three (3) coaches on the staff and the number of athletes will be limited to approximately 50 athletes. The athletes will be selected based on the number of events for which they have achieved a Western Zone Qualifying Time. The criteria is shown below in the section entitled "Selection Criteria". Athletes will need to achieved the long course qualifying time during the qualifying period which is August 5, 2009 through July 18, 2010 which will be the last day for a swim to be considered

Athletes with the greatest number of qualifying times will be considered first for selection to the PNS Western Zone team. The coaching staff will also apply judgment for Western Zone team athlete selection in specific cases, when an athlete might be needed to fill a position on a relay.

All swimmers entered into the Western Zone Meet must be currently registered with USA Swimming as an athlete and must be on the LSC entry form.

I. Eligibility:

- a. Any swimmer who within the 18 months prior to the start of the meet has participated in one (1) individual event at a USA Swimming Championships as defined in Article 207 of the USA Swimming Rules and Regulations, excluding Disability Championships and Open Water Championships, may not compete in that event or the related relay leg.
- b. Any swimmer who within the 18 months prior to the start of the meet has participated in two (2) or more individual events at a USA Swimming Championships as defined in Article 207 of the USA Swimming Rules and Regulations, excluding Disability Championships and Open water Championships, may not compete in the meet.
- c. To be eligible for selection to the Pacific Northwest Western Zone Team, a swimmer must be a registered PNS swimmer in good standing. This means that the swimmer must not owe money to either PNS or their registered club team, and must not have been restricted from representing PNS because of past disciplinary problems. Swimmers who owe money to PNS or their registered club team may clear the debt and be considered for the Western Zone Team by paying the money that is owed before the end of the qualifying period.
- d. Swimmers must submit and have an application in the PNS office by the deadline on the Athlete's Application Packet. Applications submitted after the deadline will not be accepted for the PNS Zone Team.

II. Qualifying:

- a. The qualifying period for long course times shall be August 5, 2009 (starting date for The 2009 Zone Meet last year) through July 18, 2010 (ending date for meets scheduled for this summer weekend). Selection will be based on verified long course performances achieved during the qualifying period in individual events offered at the Western Zone Championships. Swims performed outside the LSC must be officially submitted to the PNS Records Chairperson. The results must be submitted no later than 5:00 p.m. on the Monday July 19, 2009.
- b. Qualification standards for 2010 Western Zone Meet events can be found on the PNS website under “Swimmers”, then click on “Age Group Swimming”, then click on “Zone Page”, then click on “2010 PNS Western Zone Time Standards”.
- c. To be entered in an event, an athlete must achieve a Western Zone Qualifying Standard for their age group, based on their age as of August 10, 2010.

III. Selection Process:

- (1) The size of the team is limited to approximately 50 athletes
- (2) Athletes will be selected based on the number of qualifying standards achieved for their age group with the age of the athlete as of August 10, 2010.
- (3) Achieving a long course (LC) qualifying standard will take precedence over an athlete who has achieved a short course (SC) when counting an athlete’s qualifying swims.
- (4) Number of qualifying standards achieved:
 - a. Athletes achieving four (4) or more qualifying standards will be selected for the team.
 - b. Athletes achieving three (3) qualifying standards likely will be selected for the team.
 - c. Athletes achieving two (2) qualifying standards potentially will be selected for the team.
 - d. Athletes achieving one (1) qualifying standard possibly will be selected for the team.
 - e. Athletes with 1 or more qualifying standards will also be considered for the team by the coaching staff based on the Zone team’s relay requirements.

Notes:

1. Swimmers accepted for the PNS Zone Team will be entered in events for which they have Zone qualifying times to the extent that the team’s total number of entries remains under the entry limit established for the team. Each LSC is permitted a total of 400 individual entries (splashes) with a including a limitation of 160 for entries that do not meet the Zone qualifying

standard. Swimmers are limited to 6 individual events. Swimmers may be considered for events in which they have not met the meet standard only when the master team entry list

permits such entries. In filling out the application, be sure to label your event priorities carefully.

2. The Head Coach, in consultation with assistant coaches, is the final authority in the assignment of athletes to events for the Western Zone meet.
3. PNS cannot guarantee to an athlete that they will participate in a full set of events for the meet. In cases of multiple requests for the same event, fastest times and overall team needs will be used in making final decisions.
4. Athletes/coaches reserve the right to request that athletes not swim in a particular event as long as this request is made in writing to the Zone Head Coach by the event qualifying deadline. Requests for change(s) will not be considered after that date.
5. Requests for changes of events for athletes must be made by the athlete's coach. Every effort will be made by the Head Coach to work with the athlete and their coach to fulfill the athlete's purpose for participating on the Zone Team.

IV. Additional Questions:

If you have additional questions, contact head coach Tom Wunderlich at tomw@goldsgymwa.com or by phone: 425-418-6016.

2010 Pacific Northwest Zone Team

Summary Check-Off Page: (Form # 1)

Attach This Page As The 1st Page With The Athlete's Submitted Application

(Updated June 21, 2010)

Athlete's Name: _____ Age (as of August 10, 2010): _____
Application Date: _____ Gender: Male: _____ Female: _____
Parent's Name: _____ **Parent's Signature:** _____

Check Off Each Item:

- Form #1 Summary Check-Off Page with all items "checked off"
 - Form #2 Athlete Letter of Intent
 - Form #3 Athlete Application
 - Form #4 Athlete Code of Conduct
 - Form #5 Authorization to Consent To Emergency Treatment Of A Minor
 - Form #6 Physician's Agreement for Athlete to Participate & Picture Release
 - Form #7 Liability Release & Indemnification Form for Minor Travel
 - Form #8 Zone Parent & PNS Home Coach Participation Guidelines
 - Form #9 Apparel Order Information
 - Form #10 Parent Verification
 - Form #11 Athlete's Event Priority Selection for Zone Meet
 - Form #12 Best Times Report
 - Print Out of Athlete's SWIMS Data Base "Times Search By Person" for Long Course Meters
 - Print Out of Athlete's SWIMS Data Base "Times Search By Person" for Short Course Yards
 - Picture ID (passport photo, driver license, government issued ID from DOL, school ID)
 - Medical Plan Card Copy (front and back)
-
- Check made out to PNS for Athlete.

Staple Check Here:

Application Deadline: July 12, 2010 at 12:00 Noon. Application must be in the PNS office.

2010 Pacific Northwest Swimming Zone Team

Athlete Letter of Intent (Form # 2)

(Updated June 21, 2010)

Competition: 2010 Zone Meet, San Jose, California August 10-14, 2010. Swimmers should be available for a practice the day before the meet on Tuesday, August 9, 2010. Time for the team practice will be determined later.

This signed **Letter of Intent**, the other items listed on the **Summary Check-Off List**, and a **check** for amount (\$75.00) made out to: **Pacific Northwest Swimming** must be on file with the Zone Selection Committee in the PNS office by **Monday July 12, 2010 by 12:00 noon**.

Athlete Information:

I/ we submit the following named swimmer be considered for selection to PNS's Zone Team.

Swimmers Name: _____ Birth Date: _____ **Age on Aug.10, 2010:** _____

Address: _____ City: _____ Zip: _____

Name of Parent Traveling with and responsible for the athlete(s):

USA Swimming Registration # _____ Phone#: (____) _____ Sex: F M

Club: _____ Coach: _____

Coach's Phone #: (____) _____ Coach's Email _____

Parent/Guardian: _____

Address: _____ City: _____ Zip: _____

Phone #: (____) _____ Email address _____

Secondary Phone # (____) _____ Email address _____

Payment of Fees:

Payment for the deposit of \$75.00 is **required in full at the time the athlete submits their application**. Checks should be made out to Pacific Northwest Swimming (PNS).

Note (1): If an athlete has not qualified in an event prior to the application deadline (July 12th), but hopes to qualify in 1 or more event(s) in the last possible meet (i.e. a meet on the weekend of July 17-18, 2010) and does not make at least 1 qualifying time by July 18th, the deposit will be refunded.

Note (2): If an athlete achieves one or more qualifying times as is selected for the Zone team and then decided not to go on the trip, the \$75.00 deposit will **not** be refunded. The deposit is related to the cut off deadlines for making apparel ordering commitments.

Note (3): If an athlete does make a qualifying time and then is not selected by the coaching staff for the team, they will be refunded the full amount of their deposit.

Note (4): The refunds will be sent out by the end of August.

2010 Pacific Northwest Swimming Zone Team

Athlete Application (Form # 3)

(Updated June 21, 2010)

The PNS Office (Address: PNS Zone Selection Committee 753 N. Central Ave. Kent, Wash. 98032) must receive the application and payment for each swimmer by one of the following dates: (1) July 12, 2010 the last date for an application submitted with a U.S. Mail postmark, (2) July 13, 2010 the last date for an application submitted by "overnight" carrier.

The application needs to be in the PNS office by 12:00 noon on Monday July 12, 2010. Note: A check (made out to PNS) for the full payment for the trip needs to be attached to the application for each athlete. **No e-mail or telephone applications will be accepted.**

Athlete Information:

Name: _____ Club/Team: _____
 (*Please Print) First Middle Initial Last

Address _____
 Street City Zip code

Telephone: (_____) _____ Alternate/cell phone (_____) _____ Sex: Female Male

Parent's Email: _____
 (E-mail required for last minute updates or notifications)

USA Swimming Membership Number: _____

Date of Birth _____ Age on August 7, 2007 _____

Zone Team Travel Costs: (Check the box below.)

Athlete's Travel Deposit Paid by the Family for athletes traveling to the Zone meet:..... \$75.00

Picture Identification (ID): Include with your application a copy of a "picture" ID of athlete for travel & identification. (Passport photo, driver license, government issued ID (i.e. from Dept. of Licensing), student body ID, etc.)

Team Meeting with Parents: A team meeting (athletes and parents) will be scheduled for one of the team practices that will be held at Colman Pool during the week before the athlete(s) and parent(s) leave for the meet. These practices and the meeting will allow athletes meet each other and to **pick up their apparel items**. If you do not attend, you will need to drive to Snohomish on or before Saturday evening August 8th to pick up your athlete's apparel package from the head coach (who lives in Snohomish). Note: The coaches will NOT bring unclaimed apparel packages to the meet in California.

NOTE: Submit **all** of the items shown on the Summary Check-off Sheet with the athlete's application. Incomplete applications will potentially prevent an athlete from being considered for the team.

2010 Pacific Northwest Swimming Zone Team

Athlete Code of Conduct

(Form # 4)

(Updated June 21, 2010)

As a member of the 2010 PNS Zone Team, I agree to abide by the rules and regulations of the PNS Staff and Athlete Code of Conduct. I understand and agree that failure to participate may result in our financial liability and obligation to reimburse Pacific Northwest Swimming for expenses incurred on behalf of the athlete.

The Head Coach has final authority regarding any and all disciplinary action during the trip. If any violation of the Code of Conduct is committed, a review committee (Head Coach, Team Manager and Zone coach of the involved athlete(s) shall promptly investigate the circumstances of the violation and notify the individual(s) involved, and shall conduct an informal hearing on the evidence. This review committee shall then determine what disciplinary action, if any, shall be taken. Violations and disciplinary actions will be reported to PNS and reviewed by the Age Group Vice Chair for any potential additional disciplinary action.

I, (Participating Athlete) _____, as a member of USA Swimming and Pacific Northwest Swimming understand and will comply with the following:

1. The possession or use of alcohol, tobacco products, controlled substances, is prohibited throughout the designated duration of the trip. The Team Manager needs to be informed in writing as part of the athlete's application of all prescription medication, dietary supplements, or other drugs being brought on the trip by individual athletes or their parent for their athlete's use. (See Form #5)
2. Curfews will be established and adhered to during the trip. (Note: Item #2 Does not apply to 2010 Zone trip as athletes are staying with their parents.)
3. Attendance is required at all team functions, which include, but are not limited to: meetings, practices, exhibitions, meals, press conferences, and competitions unless otherwise excused or instructed by the Head Coach, the Team Manager, the Age Group Vice Chairman, or designated person in charge of the team.
4. The hallway door will be left fully open (so the interior of the room can be viewed from the hallway) when any athletes other than those assigned to occupy the room are in the room. Athletes (if not assigned to that room) need approval from the Head Coach, Team Manager, or person designated by the Head Coach or Team Manager to be in the room of another athlete. (Note: Item #4 Does not apply to 2010 Zone trip as athletes are staying with their parents.)
5. Uniform requirements established for the trip will be followed.
6. Proper respect, sportsmanship and courtesy towards coaches, officials, administrators, competitors and the public will be displayed at all times.
7. The manner in which one behaves will present a positive image of Pacific Northwest Swimming and will promote an atmosphere to meet the competitive performance objectives for the Zone meet.
8. Additional guidelines may be established as needed to assure the safety and well being of the team members and will be adhered to during the trip.

I understand that failure to comply with the Pacific Northwest Swimming Code of Conduct, as set forth in this document or additions necessary for the safety and well being of the team members, may result in disciplinary action, which may include but is not limited to the following:

1. Disqualification from one or more swimming activities.
2. Dismissal from team and return home at my own/parent's expense.
3. The infraction(s) will be reported to the PNS Board who may take additional disciplinary action including but not limited to disqualification from future PNS sponsored activities.

I may appeal any disciplinary action in accordance with Part Four of USA Swimming Rules and Regulations.

 (Printed Name of Athlete) (Signature) Date: _____

 (Printed Name of Parent/ Legal Guardian) (Signature) Date: _____

2010 Pacific Northwest Swimming Zone Team

Authorization To Consent To Emergency Treatment Of A Minor (Form #5)

(Updated June 21, 2010)

I/we, the undersigned parent(s) or legal guardian of _____, a minor, do hereby authorize Pacific Northwest Swimming as agent for the undersigned to consent to any emergency, x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable, and is to be rendered under the general supervision of any licensed physician and surgeon when parent or guardian cannot be immediately contacted. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of the agent to give specific consent to any and all such emergency diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his/her best judgment may deem advisable.

Can your athlete administer their own medication, if any is required? Y___ N___

List any prescription medication, dietary supplements, or other drugs being brought on this PNS trip: _____

For Athletes/ Patient's Protection:

Allergies and sensitivities: Is there a history of skin or other untoward reaction or sickness following injection or oral administration of:

- | | | | |
|---|---------|-------------|------------------|
| 1. Penicillin | yes | no | |
| 2. Morphine, codeine, Demerol or other narcotics? | yes | no | |
| 3. Novocain or other anesthetics? | yes | no | |
| 4. Aspirin, emperin or other pain remedies? | yes | no | |
| 5. Sulfa drugs? | yes | no | |
| 6. Tetanus, antitoxin or other serums? | yes | no | |
| 7. Iodine or methiolate? | yes | no | |
| 8. Cortisone? | yes | no | |
| 9. ACTH? | yes | no | |
| 10. Anticoagulants? | yes | no | |
| 11. Tranquilizers? | yes | no | |
| 12. Hypotensives (high blood pressure medicines?) | yes | no | |
| 13. Peanuts/ tree nuts | yes | no | |
| 14. Has swimmer ever received treatment for (if yes, circle condition) | Asthma? | Rheumatism? | Rheumatic Fever? |
| 15. Any other drug or medication? (Describe): | _____ | | |
| 16. Any foods such as egg, milk, chocolate? (Describe): | _____ | | |
| 17. Allergy to insect bites, bee stings, other? (Describe): | _____ | | |
| 18. Date of last Tetanus booster? | _____ | | |
| 19. Drugs including dietary supplements taken within the past 6 months? | _____ | | |
| 20. Other physical conditions or special food requirements of which we should be aware? | _____ | | |

Emergency Contact Information:

Home Address: _____

Father: _____ Phone # Home: _____ Work: _____

Mother: _____ Phone # Home: _____ Work: _____

Other Contact: _____ Phone # Home: _____ Work: _____

Email Addresses: _____

Physician: _____ Phone #: _____

Medical Insurance: _____ Policy Number: _____

Dental Insurance: _____ Policy Number: _____

Phone # of insurance company to obtain authorization for emergency treatment (usually an 800 number): _____

Parent /Guardian Name (Print) _____ (Signature) _____ Date _____

NOTE: Swimmer needs to bring their Medical Plan Card & Current USA Swimming Registration Card to the meet.

2010 Pacific Northwest Swimming Zone Team Liability Release & Indemnification Form For Minor Travel (Form # 7)

(Updated June 21, 2010)

I, the undersigned participant and parent, request voluntary participation for minor to participate in the **PNS Zone Meet** activity starting **August 9, 2010** (date) which begins at (in morning)____(time) and ends on **August 14, 2010**____(date) at ____ (in the evening)____ (time) sponsored by Pacific Northwest Swimming all of which are hereinafter referred to as the "activity".

I consent to my/minor's participation in the activity and traveling to and from USA Swimming events and acknowledge that the minor and I fully understand my/minor's participation in travel and the event may involve risk of serious injury or death, including losses which may result not only from my/minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, , the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. This includes all travel to and from the event arranged by PNS Swimming, including but not limited to all transportation being plane, boat, train, charter bus, van, car, airline and/or chartered plane paid either by the participant or travel paid or reimbursed by PNS or USA Swimming. I understand that if I have any risk concerns regarding travel, I should discuss the risks associated with my/minor's participation with the activity coordinators and event staff, before I sign this document and before travel begins.

Release – Minor's Rights:

In consideration of allowing Minor Participant to participate in this PNS or USA Swimming event, I hereby release and hold harmless PNS and USA Swimming, members of its board of directors, and its officers, employees, members, volunteers, other participants, and agents (collectively, the "Released Parties"), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that Minor Participant may have or sustain with respect to any and all damage and/or injury, of any type, arising out of his or her participating in this PNS or USA Swimming event. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

(Print Name of minor)

(Signature of minor)

(Date)

Release – Parents'/Guardians' Rights:

In consideration of allowing Minor Participant to participate in this PNS or USA Swimming event, I hereby release and hold harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from Minor Participant's participation in this PNS or USA Swimming event. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I certify that my/minor is in good health and have no physical condition that would prevent participation in or traveling to and from this PNS or USA Swimming activity. Furthermore, I agree to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

(Print Name of Parent/Legal Guardian)

(Signature of parent)

(Date)

Indemnification by Parent/Guardian:

The undersigned parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from Minor Participant's participation in or traveling to and from this PNS or USA Swimming activity.

(Print Name of Parent/Legal Guardian)

(Signature of parent)

(Date)

2010 Pacific Northwest Swimming Zone Team Zone Parent and PNS Home Coach Participation Guidelines (Form # 8) (Updated June 21, 2010)

As a major supporter of your swimmer, who is rightfully proud and excited to be applying for a place on this year's PNS Zone team. We as the team coaches, team manager, and chaperones are looking forward to the coming competition, and are expecting a high level of cooperation and performance from all the athletes on the team, I am sure you share these aspirations.

This is a PNS sponsored team trip, where our first priority is to promote the best interest of the individual athletes in particular and of the team as a whole. This priority includes safety, fairness of competition for all athletes and the personal growth of each individual in contributing to the team. You, as a parent and /or home coach, have already contributed enormously to the success of your athlete. In order to help and encourage you to continue this support while your athlete is with the travel team, PNS asks that you sign the following guidelines. If you have questions please speak to the Head Coach.

1. Please, if you can, travel to the meet as an official, timer, or spectator. Your personal presence and support is important to the team.
2. The athletes are on the trip to perform to the best of their ability and to become a cohesive team. Team functions are designed with this in mind. The schedule must remain flexible; therefore the athletes must stay in the **team-designated** areas, so please limit visitation to outside this environment.
3. The **"team area"** during competition is restricted to swimmers and staff members. Parents other than the one required parent for a 10 & under athlete) and home coaches may not be involved with the swimmers on the pool deck, at the PNS team meals, or PNS team functions.
4. Concerns that may arise during the course of the competition need to be referred immediately to the appropriate staff member. They are in place to help the athletes.
5. For this Zone meet, the athletes are traveling with their parent(s). The parent(s) must remain at the pool at all times when their athlete(s) is there for the meet in case there in an emergency that needs their attention. The coaching staff will not have the flexibility to deal with a situation that requires their individual attention for an athlete and takes them away from their coaching duties during the meet.

I have read and understand the guidelines set for me as a parent/coach.

_____ Date: _____
 (Printed Name of Parent/ Legal Guardian) (Signature)

_____ Date: _____
 (Printed Name of Home Coach) (Signature)

E-Mail Address Use Release

Pacific Northwest Swimming requests your permission to utilize your (the parent's) e-mail address as a part of a distribution list to provide information related to this PNS trip. Most information will be posted on the website, but there is a possibility that we may need to use your e-mail address as part of a distribution list.

Permission is granted (circle one): YES or NO

_____ Date: _____
 (Printed Name of Parent) (Signature)

2010 Pacific Northwest Swimming Zone Team

Apparel Order Information (Form #9)

(Updated June 21, 2010)

Athlete's Name: _____ Club Team: _____ Age: _____ Gender: **M F**
(circle)

PNS Team Uniform: Will include, but not limited to the items below, please indicate and circle your size for each item.

NOTE: (Circle adult size)

Shorts: X-Small Small Medium Large X-Large 2X-Large M or F

T-shirt: X-Small Small Medium Large X-Large 2X-Large M or F

Note: Apparel package also includes two (2) PNS team swim caps.

2010 Pacific Northwest Zone Team

Parent Verification (Form # 10)

(Updated June 21, 2010)

I attest that the information provided the Zone Application packet is accurate.

Further, I agree that I will reimburse PNS for the value of the PNS Zone team apparel package and entry fees, as well as any other unrecoverable costs if my swimmer registers to participate, is selected for the team, and then does not compete in the Western Zone Long Course Swimming Championships. In the failure to make such outlined reimbursement costs, Pacific Northwest Swimming will not accept the swimmer's USA Swimming membership registration for the following year.

I understand my swimmer must participate in all the team activities and commitments including but not limited to, team picture, team practice, and team meetings, and all team warm-ups as directed by the assigned coach until or unless released by the Zone Head Coach. Failure to meet team obligations may jeopardize the swimmer's eligibility to participate on any relay(s). I understand that, if my swimmer qualifies for any relay and/or for any final event, he/she must compete in those events. Athletes are required to wear the PNS Zone Team uniform for the team picture; the team cap at both prelims and finals; and the provided PNS Zone team shirt for any award ceremony and for the Western Zone Parade of participants.

We are aware that USA Swimming requires a "sit and slide" entry into the water for all practices, warm-ups, and cool-downs and that violation may result in disqualification from the meet.

We acknowledge the athlete's responsibilities to adhere to the "Athlete Code of Conduct" or incur the consequences. Failure to do so can include having the Head Coach scratch an individual event for the swimmer, remove the swimmer from a relay, or send the swimmer home, at the parent's or guardian's expense.

Athlete's Parent or Guardian

Printed Name

(Signature)

Date

2010 Pacific Northwest Zone Team Athlete's Event Priority Selection for Zone Meet (Form # 11)

(Updated June 21, 2010)

2010 Zone Event Priority Selection Sheet

Swimmer's Name: _____

PNS Club : _____

Age as of Aug. 10, 2010: _____

Gender: M _____ F _____

NOTE: On the chart below list your preferences for your top 10 individual events in priority order, numbering them from 1 through 10.

	Priority	Age Group	Priority	Age Group	Priority	Age Group(s)		
		10 & Under		11 & 12		13 & 14	15 & 16	17 & 18
Tuesday				400 Freestyle Relay		1500 Freestyle		
						400 Freestyle Relay		

Wednesday		100 Backstroke		100 Backstroke		200 Backstroke		
		100 Breaststroke		100 Breaststroke		200 Breaststroke		
		50 Freestyle		50 Freestyle		50 Freestyle		
		200 Medley Relay		400 Medley Relay		400 Medley Relay		

Thursday		50 Butterfly		400 Freestyle		100 Butterfly		
		200 Individual Medley		50 Butterfly		200 Freestyle		
				200 Individual Medley		400 Individual Medley		

Friday		100 Butterfly		100 Butterfly		200 Butterfly		
		50 Breaststroke		50 Breaststroke		100 Breaststroke		
		200 Freestyle		200 Freestyle		400 Freestyle		
				200 Medley Relay		200 Medley Relay		

Saturday		50 Backstroke		50 Backstroke		100 Backstroke		
		100 Freestyle		100 Freestyle		100 Freestyle		
		200 Freestyle Relay		200 Freestyle Relay		200 Individual Medley		
						800 Freestyle		
						200 Freestyle Relay		

2010 Pacific Northwest Zone Team

Best Times Report (Form # 12)

(Updated June 21, 2010)

VERIFICATION OF TIMES All applicants **must** complete the following chart.

- (1) **FILL IN** all events for which you have made a qualifying time. (**NOTE:** For Directions for using SWIMS Data Base, see next page)
- (2) The **TIMES** you enter on this sheet (Form #12) need to come from the **SWIMS data base printout**.
- (3) **ATTACH** SWIMS data base printout for your **LONG COURSE METERS** times between **8/5/09 & 7/18/10**
- (4) **ATTACH** SWIMS data base printout for your **SHORT COURSE YARDS** times between **8/5/09 & 7/18/10**

NAME:		AGE:		CLUB:		
EVENT	TIME		Indicate the meet name and date below.			
	LCM	SCY			MEET NAME	DATE
50 Free						
100 Free						
200 Free						
400 Free						
800 Free						
1500 Free						
50 Back						
100 Back						
200 Back						
50 Breast						
100 Breast						
200 Breast						
50 Fly						
100 Fly						
200 Fly						
200 I.M.						
400 I.M.						

All times will be verified through the PNS Database. Times achieved outside of our LSC must be reported to the PNS Office for inclusion in the database (submit full meet results or request the results to be emailed to office@pns.org).

2010 Pacific Northwest Zone Team

Directions for Using the USA Swimming SWIMS Data Base and the “Times search By Person” Function

(Updated June 21, 2010)

Steps to Access and Print Athlete’s “Times Search By Person” from the USA Swimming Data Base:

(1) Open Internet Explorer

(2) Paste the following address into your Internet Explorer Address Window:

www.usaswimming.org/USASWeb/DesktopDefault.aspx?TabId=358&Alias=Rainbow&Lang=en-US - 57k

This will take you to the USA Swimming Website and to the area titled: “Times & Teams”. Under “Times Search” click on “Individual Times Search” on left hand side of page. Then scroll down until you get to the “Individual Times Search Information” section.

(3) Type in the last name and then the first name of the athlete in the “Select a Person” spaces in that order.

(4) In the “Select a Date” section, click on “Date Range”, and enter the dates shown between the quote marks, “8/5/2009” in the first box and “7/19/2010” in the second box

Note: Be careful typing in the dates and also the years.....2009 on the first one and 2010 on the second one.

(5) In the “Optional Search Parameters” area, click on “LCM Events”

(6) Then click on the “Search” button at the bottom of the area. Then scroll down to see the events and times.

Note: This should bring up all of the LCM swims between August 5, 2009 (start of last year’s Zone meet) and July, 19, 2010 (the day after the last event qualifying date)

(7) Print off this sheet, by clicking on “File”, then click on “Print” on the drop down menu. Select your attached printer and then click on the “Print” button. This should print off a copy of the athlete’s LCM swims during the specified time period.

Note: You may need to click on the small “2” at the bottom of the page to print the 2nd page of times. Once the second page of times is shown, hit print again to print the 2nd page of times.

(8) Attach this print out to your Application Packet, and check of the box for SWIMS Data Base for LCM.

(9) Once you have the print out for LCM, go back to the “Optional Search Parameters” area and click on “SCY Events”. Then click on the “Search” Button.

Note: This should bring up all of the SCY swims between August 5, 2009 (the start of the entry window for the 2010 Zone meet) and July 19, 2010 (the day after the last event qualifying date). This data is needed to be able to potentially enter the athlete in additional events at the Zone meet under the rules allowing “Non-Standard swims.

(10) Print off this sheet, by clicking on “File”, then click on “Print” on the drop down menu. Select your attached printer and then click on the “Print” button. This should print off a copy of the athlete’s LCM swims during the specified time period.

(11) Attach this print out to your Application Packet, and check of the box for SWIMS Data Base for SCY.