



# Application for PVS Travel Team

## 9<sup>th</sup> National Black Heritage Championships Swim Meet

### May 28-29, 2011 in Cary, NC



Applications must be received by the PVS Travel Team Coordinator no later than

**Friday March 25, 2011**

**APPLICANTS ARE STRONGLY ENCOURAGED TO APPLY BEFORE THE DEADLINE AS WE WILL SELECT THE TEAM ON FIRST COME BASES**

**Deposit of \$100.00 needed to secure a spot.**

Please ensure checks/money orders are made payable to **DC Wave Booster Club**

**Please PRINT all information neatly and clearly!**

#### Applicant Information

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

*Last*

*First*

*M.I.*

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

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Home Phone: (     ) \_\_\_\_\_ USA Swimming Registration Number: \_\_\_\_\_

Gender  Girl  Boy

*Email for Travel Correspondence*

*Age as of May28, 2011*

*Registered Club*

*Coaches Name*

*Coach's Contact Email and/or Phone*

Swimmers with a Disability: Are you applying to be a member of the PVS Travel Team for the 9<sup>th</sup> National Black Heritage Meet under provisions in the meet announcement pertaining to swimmers with a disability (see pages 5-6 of Meet Invitation)  **No**  **Yes** (If Yes, please complete Page 5)

Athletes must provide events and times to the Travel Team Coordinator along with the application.

Relay teams will be selected by the PVS Travel Team coaching staff. The position in a relay and/or the strokes swum in medleys will also be determined solely by the coaching staff.

A list of applications will be posted promptly upon receipt. Please wait at least one week before inquiring about the status of any application submitted. In submitting this application, we understand that a swimmer selected for this team will be representing PVS, and as such will follow all guidelines and codes of conduct established by Potomac Valley Swimming.

*Swimmer Signature*

*Date*

*Parent Signature*

*Date*

**Mail/Email Completed Application to:**

**Coach Rob Green, PVS 9<sup>th</sup> National Black Heritage Meet Travel Team Coordinator**, Robert Green (301) 648-6216 (cell) [mailto: robert.green@dc.gov](mailto:robert.green@dc.gov). Rob can be reached Monday through Friday – 9:00 am to 5:00 pm

For Coordinator Use Only:

\_\_\_\_\_ Date Rec'd \_\_\_\_\_ Payment Rec'd \_\_\_\_\_ Code of Conduct Signed \_\_\_\_\_ Supplemental Info Rec'd \_\_\_\_\_ Ins Card Rec'd \_\_\_\_\_ Apparel Order Form Rec'd



**Application for PVS Travel Team**  
**9<sup>th</sup> National Black Heritage Championships Swim Meet**  
**May 28-29, 2011 in Cary, NC**



**Events Application**

For Events and Event Numbers, please see **page 6** of the application packet

Event #	Event Name	Entry Time

**T-Shirt Order**

Below is the apparel that the PVS 9<sup>th</sup> National Black Heritage Meet Travel Team will be providing each swimmer:  
adept

- PVS 9<sup>th</sup> National Black Heritage Meet T-Shirt
- PVS 9<sup>th</sup> National Black Heritage Meet Cap

**Team T-Shirt Size**

PVS Short Sleeve T-Shirt       YL       S       M       L       XL (check mark one size)

**Additional Information**

**Deposit \$100.00 needed to secure a spot for the trip. All checks/money orders should be made out to **DC WAVE Booster Club****

**Team Practice will be on April 16<sup>th</sup> and May 14<sup>th</sup> at Takoma Park from 11am-1pm**  
**Reminder:**

**Applications must be received by the PVS Travel Team Coordinator no later than **Friday, March 25, 2011****

**APPLICANTS ARE STRONGLY ENCOURAGED TO APPLY BEFORE THE DEADLINE AS WE WILL SELECT THE TEAM ON FIRST COME BASES**

For Coordinator Use Only:

**POTOMAC VALLEY SWIMMING  
SUPPLEMENTAL REQUEST FOR INFORMATION**

Swimmer information				
Last	First	Middle	Date of Birth	
Parent / Guardian Contact				
Last	First	Middle	Telephone	
			Home	
Address			Work	
			Other	
			Other	
Non-Parent Emergency Contact Information				
Name		Relationship	Telephone	
Medical Insurance Information				
Medical Coverage Provider	Policy #	Group #	Subscriber #	

Permission to dispense:

Aspirin                      Yes                      No                      Tylenol \_\_\_\_\_                      Yes                      No

Please note that our child is allergic to the following:

\_\_\_\_\_

List all medications and dosages that your child takes on a daily basis:

\_\_\_\_\_

I/we acknowledge that our child will be representing PVS, and as such will follow all guidelines and codes of conduct established by Potomac Valley Swimming. We further acknowledge that if our child violates one of the rules of the code of conduct he/she has the right to ask for a hearing before any discipline action is taken.

I, the undersigned parent/guardian, hereby authorize and agree to allow the necessary medical services to be administered to my son/daughter \_\_\_\_\_, if I cannot be contacted in the event of an emergency. I further agree to be responsible for the payment of emergency services not covered by my insurance.

\_\_\_\_\_

Signature of Parent

\_\_\_\_\_

Date

**PLEASE INCLUDE COPY OF BOTH FRONT AND BACK OF INSURANCE CARD**

# POTOMAC VALLEY SWIMMING CODE OF CONDUCT

All PVS competitive programs where athlete, coaches, or parent volunteers are sponsored by, or represents, PVS require them to accept the following Code of Conduct as a condition of participation.

I \_\_\_\_\_, as a member of PVS, understand that I represent Potomac Valley Swimming and I will do nothing to bring discredit upon PVS or myself. Therefore, I will not;

- Possess, steal, destroy, vandalize, or in any way endanger the safety or property of others.
- Possess or use illegal drugs or controlled substances, including tobacco products.
- Possess or use alcoholic beverages.

I understand that failure to comply with the above will result in immediate dismissal from the team and return home at my or my parent's expense. I further understand that additional sanctions may be imposed after a timely review by the PVS Board of Directors.

If I am participating as an athlete on a PVS team, I also promise to:

- Comply with any team rules, including nightly curfews, established by PVS, the team managers, or the coaching staff.
- Attend all team functions, including meetings, practices, meals, competitions and any other function designed by the team managers and/or coaches unless specifically excused by one of the above.
- Travel with the team unless other specific arrangements are made known and approved by the team manager or head coach.
- Compete in the events chosen by the coaching staff and attend all meet competition sessions as directed by the coaching staff.
- Comply with established uniform requirements.
- Maintain an open door when male and female athletes are in the same room.
- Abide by any additional guidelines established by the team manager or coaching staff to ensure the safety and well-being of team members.
- Act respectfully toward team members, coaches, officials, administrators, other volunteers and fellow athletes.

I understand that failure to comply with the above conditions of the Code will result in disciplinary action which may include, but is not limited to the following (listed in order of severity):

- Termination of participation in non-swimming team activities.
- Termination of participation in one or more swimming events.
- Dismissal from the team and return home at own expense
- Disqualification from future teams.
- Denial of future requests for PVS travel assistance.

I understand that I may appeal any disciplinary action in accordance with the PVS Bylaws.

<b>Athlete/Coach/Parent Volunteer</b>		<b>Date</b>	
<b>Parent or Legal Guardian if under 18</b>		<b>Dat e</b>	

# Swimmers with a Disability Entry Form

## Sanction # -----

Name: \_\_\_\_\_ Club \_\_\_\_\_ LSC \_

USA Swimming #: \_\_\_\_\_ Age first day of the meet

Swimmer email address: \_\_\_\_\_

Swimmer Phone number:

Name of person completing this form:

E m a i l            a d d r e s s :

Phone #:

Please enter events below. Each swimmer is limited to three (3) individual events per day and a total of six (6) events in the Meet. Please indicate the swimmer's preference regarding seeding of their entry for each event. Please note that changing age groups may change the session that the swimmer swims. Changing the distance may affect the day on which the swim occurs. Take these factors into consideration when selecting the seeding procedure for each event listed below. The Meet Referee has the final decision regarding seeding procedures.

Event #	Event Description	Entry Time	Seed With Age Group (same age, same distance)	Seed with Different Distance (same age, different distance)	Seed with Comparable Time (younger age, distance depends on entry time)



Saturday, May 28, 2011  
Session 1 West Course  
Event # Women

Warm-ups: 7:00 am

Timed Finals: 8:30 am  
Session 1 West Course  
Event # Men

Event Name

1	15 & Over 200 yd Freestyle	2
3	13-14 200 yd Freestyle	4
5	15 & Over 50 yd Breaststroke	6
7	13-14 50 yd Breaststroke	8
9	15 & Over 100 yd Butterfly	10
11	13-14 100 yd Butterfly	12
13	15 & Over 50 yd Backstroke	14
15	13-14 50 yd Backstroke	16
17	15 & Over 200 yd Individual Medley	18
19	13-14 200 yd Individual Medley	20
21	15 & Over 200 yd Freestyle Relay	22
23	13-14 200 yd Freestyle Relay	24

Saturday, May 28, 2011  
Session 2A West Course  
Event # Women

Warm-ups: NOON

Timed Finals: 1:30 pm  
Session 2B East Course  
Event # Men

Event Name

25	11-12 200 yd Freestyle	26
27	9-10 200 yd Freestyle	28
29	8 & Under 100 yd Freestyle	30
31	11-12 50 yd Breaststroke	32
33	9-10 50 yd Breaststroke	34
35	8 & Under 25 yd Breaststroke	36
37	11-12 100 yd Butterfly	38
39	9-10 100 yd Butterfly	40
41	8 & Under 50 yd Butterfly	42
43	11-12 50 yd Backstroke	44
45	9-10 50 yd Backstroke	46
47	8 and Under 25 yd Backstroke	48
49	11-12 200 yd Individual Medley	50
51	9-10 100 yd Individual Medley	52
53	8 and Under 100 yd Individual Medley	54
55	11-12 200 yd Freestyle Relay	56
57	9-10 200 yd Freestyle Relay	58
59	8 and Under 100 yd Freestyle Relay	60



Sunday May 29, 2011  
 Session 3 West Course  
 Event # Women

Warm-ups: 7:00 am

Timed Finals: 8:30 am  
 Session 3 West Course  
 Event # Men

Event Name

61	15 & Over 100 yd Freestyle	62
63	13-14 100 yd Freestyle	64
65	15 & Over 50 yd Butterfly	66
67	13-14 50 yd Butterfly	68
69	15 & Over 100 yd Backstroke	70
71	13-14 100 yd Backstroke	72
73	15 & Over 100 yd Breaststroke	74
75	13-14 100 yd Breaststroke	76
77	15 & Over 50 yd Freestyle	78
79	13-14 50 yd Freestyle	80
81	15 & Over 200 yd Medley Relay	82
83	13-14 200 yd Medley Relay	84
85	Cullen Jones/Lottery Winners Mixed Exhibition 50 Free	
	Coaches/Officials/Parents/Alumni Mixed 100 Free Relay	86

Sunday May 29, 2011  
 Session 4A West Course  
 Event # Women

Warm-ups: NOON

Timed Finals: 1:30 pm  
 Session 4B East Course  
 Event # Men

Event Name

87	11-12 100 yd Freestyle	88
89	9-10 100 yd Freestyle	90
91	8 & Under 50 yd Freestyle	92
93	11-12 50 yd Butterfly	93
95	9-10 50 yd Butterfly	96
97	8 & Under 25 yd Butterfly	98
99	11-12 100 yd Backstroke	100
101	9-10 100 yd Backstroke	102
103	8 and Under 50 yd Backstroke	104
105	11-12 100 yd Breaststroke	106
107	9-10 100 yd Breaststroke	108
109	8 & Under 50 yd Breaststroke	110
111	11-12 50 yd Freestyle	112
113	9-10 50 yd Freestyle	114
115	8 & Under 25 yd Freestyle	116
117	11-12 200 yd Medley Relay	118
119	9-10 200 yd Medley Relay	120
121	8 and Under 100 yd Medley Relay	122