

## 2024 WESTERN ZONE CHAMPIONSHIPS TEAM APPLICATION

- Date of Meet:** August 7-10, 2024
- Location:** **Greater Boise Aquatic Center - Boise ID 3575 S Findley Ava, Boise, ID 83705**
- Cost:** \$1200 for eligible swimmers who choose to travel with the team. The Zone Staff will select and enter all the swimmers into the meet. 10 and under swimmers will make their own travel arrangements for the swim meet. They will also be responsible for their own lodging, food, and transportation while at the meet. There may be a stipend of up to \$1200, for those swimmers who meet all requirements that are set by the LSC and Zone Staff. 11/12 swimmers will have a travel option that **must be made at the time of turning in their application.** They can either travel and stay with the SI Western Zone team or be responsible for their own travel arrangements the same as the 10/under swimmers. 13/14 swimmers will travel with the team
- Depart Date:** Tuesday August 6, 2024, Flying on Southwest Airlines
- Return Date:** Sunday August 11, 2024, Flying on Southwest Airlines
- Hotel Accommodations:**  
The team will be staying at: **TBA**
- Head Coach:** **John McGlynn** Email: [jpm\\_vc@hotmail.com](mailto:jpm_vc@hotmail.com)
- Zone Coordinator:** Sean Redmond (760)716-7679 cell or (760) 728-9244 Email: [seanmary@aol.com](mailto:seanmary@aol.com)  
1335 Via Del Oro, Fallbrook, CA 92028
- Eligibility:** All swimmers must have a minimum of one 2024 Western Zone qualifying times (national age group AAA) in separate events to apply and be considered for the team. Swimmers with six 2024 Western Zone qualifying times, separate events, will be granted automatic selection when they apply. **The Zones Coaches/Committee reserves the right to limit the team to a max of 48 swimmers total from all age groups. The intent is to have a max of eight swimmers per age group per gender**
- Entry deadline:** Swimmers must submit a **COMPLETE ZONE PACKET** by **Saturday, July 27, 2023, by the conclusion of the prelims** of the SI Age Group Championships to Mary Redmond in the Admin Office. Updates will be accepted July 28 provided that a completed application is received by the 27th, by the end of prelims.
- Team Selection:**
- To apply the swimmer must have at least one (1) 2024 Western Zone qualifying time. Times must have been achieved since the Aug 2, 2023 Western Zone Championships through the application deadline.
  - Applications will be accepted after July 1, 2024. Applications must be received no later than July 27, 2024
  - Applications may be sent directly to the Zone Coordinator (see address above) and must be received by Monday July 22, 2024 (***do not require a signature or receipt***).
  - Swimmers with 6 (six) or more qualifying times; and who submit a complete and timely application, will automatically be selected to the team.
  - The coaching staff will select the best team from the qualified applicants.
  - Swimmers with 2-5 cuts will be given priority over swimmers with 1 cut and will be selected by the Zone Coaching staff. The selection will be using the results from the 2023 WZAG; top 8 and top 16: compared to the swimmers submitted best time to select the best team.

- Swimmers with 1 (one) cut may be considered for selection to complete a relay(s). If there are 3 swimmers in an age group: a fourth may be selected. If there are 7 swimmers, an 8<sup>th</sup> may be selected.
- The coaching staff will enter the swimmers in the events that will be best for the overall team's success. Swimmers are required to compete in all entered events, individual and relay.
- Selection of the swimmers will be based on the swimmers' times and compared to the placing of the top eight times of previous Zone Meet.
- A maximum of four (4) swimmers with disabilities may be selected: two (2) 12/U and two (2) aged 13-14.
- Swimmers 10 and under and those 12 and under who decide to not travel with the team, may receive a stipend from SI Swimming of up to \$1200 after the meet. Swimmers not competing in all events that they are entered, and/or not complying with all SI and Team Rules and Policies will not receive funds.
- Swimmers and parent/guardians are required to read and sign the SI Swimming Code of Conduct. Swimmers must always abide by the code, failure to do so will result in disciplinary action.
- Swimmers must attend ALL sessions (regardless of their individual entries), meetings, workouts, etc. as determined by the Head Zone Coach. Early departure from the Team or late arrival is NOT permitted, unless cleared by the Head Coach.
- The LSC has a block of rooms for the swimmers and a separate, but limited, block of rooms for parents and those swimmers who are not traveling with the team. *There may be some rooms available after the team is selected. Do not contact the hotel to book in our block of rooms as it could take rooms from the swimmers, contact Sean Redmond to be placed on the list – seanmary@aol.com*
- Prior to departure, the Head Coach must be provided with swimmer's contact information including: lodging (phone number and name) and cell phone number (if available), etc.
- Team Staff, in a funded or unfunded role, must abide by the SI Swimming Code of Conduct.
- ***Swimmers selected for the 2024 SI Western Zones Team must agree not to compete in any athletic competition between July 29, 2024, and the beginning of Zones. Violation of this rule may result in dismissal from the team.***

**Notification:** All applicants will be notified of their team status by 9:00 pm, July 28, 2024.

**Team Meeting:** All team members will be required to attend a **mandatory meeting** on Saturday, August 3, 2024. **Location and time will be announced.**

**Travel Rules:** All 13–14-year-old swimmers must remain part of the team from departure until the conclusion of the meet, this also includes those 11–12-year-old who travel with the team. At the conclusion of the meet, a swimmer may be released to his/her parents only if a written request is submitted to the team manager or head coach at least **48 hours PRIOR to departure from San Diego.**

12 and under swimmers who do not travel with the team are responsible for their own arrangements (travel, lodging and supervision, etc.), and must be present for the entire meet, as determined by the Head Coach.

**Uniform:** Team members entered in the Zone Meet, including the 12/U, will receive the following: Team Shirts and Team caps. **Swimmers must supply their own suit for competition. 12/U swimmers may NOT wear a tech suit for competition or warmups.** During workouts and warmups other suits may be worn.

**Code of Conduct:** Each swimmer will be required to sign the San Diego-Imperial Code of Conduct. Swimmers must follow staff instructions at all times.

**General** Bring extra money (\$200.00) for extra meals and souvenirs. Swimmers are required to sit with the team at all times, when at the meet. **This is a closed pool deck. The team area will only be for the swimmers, coaches and chaperones. Swimmers must carry their athlete pass at all times in the meet area. Spectator fees will be charged.**

# Code of Conduct

This code of conduct shall apply to all those representing San Diego-Imperial Swimming.

The following shall be prohibited at all times:

- I will obey all of USA Swimming's rules and code of conduct.
- I will always respect and show courtesy to my teammates and coaches.
- I will demonstrate good sportsmanship at all practices and meets.
- I will attend all team meetings and training sessions.
- I will show respect for all facilities and other property.
- I will refrain from foul language, violence, behavior deemed dishonest, offensive, or illegal.
- Possession of, use of, or knowledge of the use of illegal substances by those representing SI Swimming or use in the presence of those representing SI Swimming.
- Inappropriate or destructive behavior or knowledge (without immediate reporting) of same.
- Smoking by athletes (or use of other tobacco products) while representing SI Swimming. Knowledge of use is to be considered use (unless immediately reported).
- Use by athletes, knowledge of use of, or providing alcohol to or use around swimmers.
- Use of alcohol by those having direct responsibility for swimmers is also prohibited.
- Violation by any representative of the laws, regulations, rules, etc. is included.

Note: Persons present while any of the above-mentioned prohibited activities occur must leave the area immediately and report the situation immediately to the Team Manager, a coach or chaperone or considered to be a participant by choice.

## **TRAVEL TRIPS**

The following are mandatory and the responsibility of the Head Coach or designee:

1. A nightly curfew will be established and enforced.
2. All athletes and individuals representing SI Swimming shall be housed in an appropriate manner.
3. Coaches and athletes must attend all team meetings and/or required functions.
4. The Team Manager/Head Coach shall have in his possession a signed "Consent to Treat" form for all minors on the trip.

Further, all swimmers who have been designated as part of the team representing SI Swimming are to remain as part of that team from the time of departure until reaching the return destination (San Diego County). The swimmers must at all times follow the team staff's instructions as it relates to swimming, lodging, meals, team meetings, social events or any other incidentals or directions that may be given.

A swimmer can only be released to his/her parents prior to the completion of all travel events if such release has been requested in writing by the parent and addressed to and received by the Team Manager at least 48 hours prior to the team's departure. If the Team Manager grants approval for early release, such approval will be provided to the parent(s) in writing and signed by the Team Manager. Verbal approval will not be given or accepted.

## KEEP FOR YOUR RECORDS

WOMEN			MEN			
2023 8 <sup>th</sup> place	2024 zone cut		AGE/EVENT	20234 zone cut		2023 8 <sup>th</sup> place
LCM	YARDS	LCM	10 & UNDER	LCM	YARDS	LCM
32.72	28.89	32.79	50 FREE	32.79	28.59	31.87
1:12.84	1:04.19	1:13.09	100 FREE	1:12.89	1:03.69	1:10.90
2:37.03	2:20.89	2:39.78	200 FREE	2:36.59	2:16.89	2:33.56
39.58	33.29	38.89	50 BACK	38.89	33.49	38.71
1:26.36	1:11.79	1:23.89	100 BACK	1:22.89	1:11.89	1:23.32
44.16	37.89	43.09	50 BREAST	42.69	37.29	43.35
1:34.33	1:23.09	1:34.89	100 BREAST	1:33.79	1:22.19	1:34.60
36.21	32.49	36.59	50 FLY	36.29	31.99	35.44
1:24.30	1:14.19	1:24.59	100 FLY	1:23.59	1:13.19	1:21.34
3:01.37	2:37.39	2:59.59	200 IM	2:58.39	2:36.19	2:58.61

2023 8 <sup>th</sup> place	2024 zone cut		AGE/EVENT	2024 zone cut		2023 8 <sup>th</sup> place
LCM	YARDS	LCM	11-12	LCM	YARDS	LCM
29.04	26.59	30.39	50 FREE	29.29	25.59	27.83
1:03.68	57.79	1:06.09	100 FREE	1:03.89	55.79	1:02.12
2:19.18	2:05.99	2:23.19	200 FREE	2:19.49	2:01.39	2:14.98
4:53.70	5:36.89	5:01.69	400/500 FREE	4:55.09	5:27.89	4:51.55
33.55	29.99	34.49	50 BACK	33.69	29.29	32.47
1:13.10	1:04.69	1:15.39	100 BACK	1:12.99	1:02.79	1:11.91
2:38.67	2:18.79	2:40.69	200 BACK	2:36.69	2:15.19	2:35.71
38.09	33.79	38.49	50 BREAST	37.49	32.69	37.13
1:21.75	1:13.19	1:24.79	100 BREAST	1:22.19	1:10.49	1:19.33
2:56.04	2:37.89	3:02.79	200 BREAST	2:56.59	2:32.49	2:57.52
31.03	28.69	32.39	50 FLY	31.89	28.19	29.69
1:11.94	1:04.19	1:13.09	100 FLY	1:10.89	1:02.39	1:09.57
2:50.59	2:21.39	2:40.99	200 FLY	2:37.49	2:26.09	2:43.04
2:43.32	2:21.59	2:41.89	200 IM	2:37.79	2:17.29	2:36.59
5:46.63	5:01.89	5:45.49	400 IM	5:37.79	4:53.19	5:33.67

2023 8 <sup>th</sup> place	2024 zone cut		AGE/EVENT	20234 zone cut		2023 8 <sup>th</sup> place
LCM	YARD	LCM	13-14	LCM	YARDS	LCM
28.33	25.59	29.19	50 FREE	27.09	23.49	25.94
1:03.87	55.49	1:03.29	100 FREE	59.09	51.59	56.39
2:15.39	1:59.49	2:16.89	200 FREE	2:08.89	1:52.39	2:03.31
4:46.62	5:20.39	4:48.19	400/500 FREE	4:34.29	5:02.79	4:29.03
9:39.72	11:01.59	9:53.99	800/1000 FREE	9:30.29	10:29.49	9:16.65
18:39.45	18:22.79	18:56.49	1500/1650 FREE	18:09.39	17:31.99	17:41.21
1:09.89	1:00.19	1:10.69	100 BACK	1:05.89	56.19	1:03.42
2:32.92	2:11.09	2:31.19	200 BACK	2:23.09	2:02.79	2:21.87
1:17.90	1:09.09	1:20.19	100 BREAST	1:14.59	1:03.89	1:10.37
2:52.30	2:29.99	2:52.59	200 BREAST	2:41.39	2:18.79	2:42.42
1:06.94	59.99	1:08.09	100 FLY	1:03.89	55.89	1:01.67
2:37.47	2:12.79	2:31.6	200 FLY	2:22.19	2:04.29	2:18.93
2:30.28	2:13.39	2:33.89	200 IM	2:25.09	2:05.69	2:23.42
5:23.45	4:45.69	5:26.49	400 IM	5:08.59	4:28.29	5:07.23

**Order of Events**

G/B	Age Group	Events Name	G/B	Age Group	Events Name
Wednesday August 3					
1-2*	11-12	400 IM	15-16	10/under	100 back
3-4	10/under	50 breast	17-18	11-12	100 back
5-6	11-12	50 breast	19-20	13-14	200 back
7-8	13-14	100 breast	21-22**	13-14	800 free
9-10	10/under	200 free	23-24	12/under	200 mixed free relay
11-12	11-12	100 Free	25-26	14/under	200 mixed free relay
13-14	13-14	100 free			

G/B	Age Group	Events Name	G/B	Age Group	Events Name
Thursday August 4					
27-28	10/under	100 free	39-40	10/under	200 IM
29-30	11-12	200 free	41-42	11-12	200 IM
31-32	13-14	200 free	43-44	13-14	400 IM
33-34	10/under	50 fly	45-46*	11-12	200 back
35-36	11-12	50 fly	47-48	10/under	200 free relay
37-38	13-14	100 fly	49-50	12/under	200 free relay
			51-52	14/under	200 free relay

G/B	Age Group	Events Name	G/B	Age Group	Events Name
Friday August 5					
53-54*	11-12	200 fly	65-66	13-14	100 back
55-56	10/under	100 breast	67-68*	11-12	400 free
57-58	11-12	100 breast	69-70	13-14	400 free
59-60	13-14	200 breast	71-72	12/under	200 mixed med relay
61-62	10/under	50 back	73-74	14/under	200 mixed med relay
63-64	11-12	50 back			

G/B	Age Group	Events Name	G/B	Age Group	Events Name
Saturday August 6					
75-76	13-14	200 IM	87-88	13-14	200 fly
77-78	10/under	50 free	89-90*	11-12	200 breast
79-80	11-12	50 free	91-92**	13-14	1500 free
81-82	13-14	50 free	93-94	10/under	200 med relay
83-84	10/under	100 fly	95-96	12/under	200 med relay
85-86	11-12	100 fly	97-98	14/under	200 med relay

\*Timed Finals events with the fastest heat swum in Finals

\*\*Timed Finals events swum in prelims fastest to slowest alternating Girls and Boys

- Warm up Times will be announced.
- Prelims will start at 8:30, finals will start no sooner than two (2) hours after completion of Prelims.
- Finals will be swum in A/B format consisting of the top 16 qualifying times of each event from prelims.
- The 11/12 200 backstroke, 200 Butterfly, 200 Breaststroke and 400 IM are timed final events.
- The 13/14 800 free and 1500 free are timed final events, will be swum fastest to slowest, alternating women and men.
- All relay events will be timed finals and swum at the end of each final session.

USA Swimming defines a Technical Suit as one that has the following components:

Any suit with any bonded or taped seams regardless of its fabric or silhouette:

Any suit with woven fabric extending past the hips.

There may be a meet admission charge for all spectators.

- There may be an after-meet social that will be available for all swimmers and/or their families.

# Code of Conduct Declaration

I have read and understand the San Diego-Imperial Swimming Code of Conduct and accept all the rules, regulations and conditions as outlined therein (including this declaration). I further agree to follow all directions as they are given by the Team Staff.

I agree to wear the team uniform during all competitions and to supply this suit at my own expense.

I understand that any violation of any part of the Code of Conduct (attached), Staff direction or team information sheets (including this declaration), can result in any or all of the following:

1. Being scratched from any or all remaining events.
2. Being sent home, at once, at either my or my parent's expense.
3. Not being allowed to represent SI Swimming on any future team or receive SI Swimming team travel funding.
4. All other disciplinary actions as deemed appropriate by SI Swimming and team staff.

I understand that I have the right to appeal disciplinary actions through the processes established in the USA Swimming and SI Swimming codes.

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Swimmer Signature

Date

I, the undersigned Parent/Guardian of: \_\_\_\_\_  
have read and understand the Code of Conduct, this form and all other team information sheets and have ensured that my son/daughter fully understands the content. I declare that I agree to and support the Code of Conduct, this form and all other team information sheets and all consequences as they relate to non-compliance.

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Parent Signature

Date

**Contact numbers:**

Daytime: \_\_\_\_\_

Name

Relationship

Number

Evening: \_\_\_\_\_

Name

Relationship

Number

Special diet request/allergies: \_\_\_\_\_

Roommate request: \_\_\_\_\_

## Authorization To Treat A Minor

I/we, the undersigned parent(s) or legal guardian of: \_\_\_\_\_, a minor, do hereby authorize San Diego-Imperial Swimming, Inc. or its designated representative to consent to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care rendered under the general or special supervision and upon the advice of a duly licensed physician or dentist. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached. This authorization is given pursuant to the provisions of section 25.8 of the Civil Code of California.

- Can your athlete administer their own medication, if any is required? Y\_\_\_ N\_\_\_
- Does the Team Manager or chaperone staff have your permission to administer prescription or non-prescription medication to your athlete if necessary? Y\_\_\_ N\_\_\_

**For Athletes/ Patient's Protection:**

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

Penicillin	Y: ___	N: ___	Iodine or methiolate	Y: ___	N: ___
Morphine, codeine, demerol or other narcotics	Y: ___	N: ___	Hypotensives (blood pressure medications)	Y: ___	N: ___
Lidocaine or other anesthetics	Y: ___	N: ___	ACTH	Y: ___	N: ___
Sulfa drugs	Y: ___	N: ___	Anticoagulants	Y: ___	N: ___
Tetanus antitoxin or other serums	Y: ___	N: ___	Cortisone	Y: ___	N: ___
Tranquilizers	Y: ___	N: ___			

2. Has swimmer ever received treatment for: Asthma: \_\_\_ Rheumatism: \_\_\_ Rheumatic Fever: \_\_\_
3. Any other drug or medication? (Describe): \_\_\_\_\_
4. Any food allergies such as egg, peanuts, milk, chocolate? (Describe): \_\_\_\_\_
5. Allergy to insect bites, bee stings, other? (Describe): \_\_\_\_\_
6. Date of last Tetanus booster? : \_\_\_\_\_
7. Other physical conditions of which we should be aware? \_\_\_\_\_

**Emergency Information**

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

Father: \_\_\_\_\_ Phone # Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mother: \_\_\_\_\_ Phone # Home: \_\_\_\_\_ Work: \_\_\_\_\_

Other Contact: \_\_\_\_\_ Phone # Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email Addresses: \_\_\_\_\_

Primary Care 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

**Please staple a copy of the insurance card to the right hand corner of this page.**



Age as of 8/2/23: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ TEAM: \_\_\_\_\_ Check #: \_\_\_\_\_  
 Gender: \_\_\_\_\_

NAME \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

ADDRESS \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_ Swimmer's Cell # \_\_\_\_\_

T-SHIRT SIZE \_\_\_\_\_ Jacket Size \_\_\_\_\_

Are You Attending After Meet Social? \_\_\_\_\_ Family member attending social? # \_\_\_\_\_

PLEASE FILL OUT THIS APPLICATION COMPLETELY. **SUBMIT ALL YOUR BEST TIMES SINCE August 3, 2023 FOR ALL EVENTS.** EACH SWIMMER WILL BE SWIMMING IN UP TO SIX INDIVIDUAL EVENTS AND ON RELAYS. **WRITE IN TIMES or provide a printout of times.**

**↓ NUMBER YOUR EVENTS IN ORDER OF PREFERENCE**

This will help the staff to select your events, once entries have been submitted; changes might not be made.

EVENT	SWIM PREFERENCE	LC Time: Put TIME & X in box if Zone Cut ↓	SC Time: Put TIME & X in box if Zone cut ↓	Date of Swim	MEET in which time was swum: Must be from 8/3/23 – 7/28/24
50 FREE					
100 FREE					
200 FREE					
4/500 FREE					
8/1000 FREE					
1650/1500 FR					
50 BACK					
100 BACK					
200 BACK					
50 BREAST					
100 BREAST					
200 BREAST					
50 FLY					
100 FLY					
200 FLY					
200 IM					
400 IM					

**2024 CLUB COACH QUESTIONNAIRE REGARDING ZONE PARTICIPANT**

1. Does the swimmer require a special type of warm-up for prelims and/or finals?

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2. Are there special instructions regarding their races (splits etc)?

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3. Are there any special considerations or needs that need to be addressed regarding Your swimmer?

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4. Has your swimmer been working out the entire 2024 Long Course Season?

Yes No \_\_\_\_\_  
Coaches' signature

If no, please give duration of workouts during the 2024 Long Course Season.

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5. \_\_\_\_\_  
**Team Coach Signature**

# 2024 WESTERN ZONE CHAMPIONSHIPS TEAM APPLICATION

## CHECK LIST

- \_\_\_\_\_ COPY OF INSURANCE CARD (FRONT AND BACK) STAPLED TO PAGE 8
- \_\_\_\_\_ PRINT OUT OF BEST LC TIMES FROM USA SWIMMING WEBSITE STAPLED TO PAGE 9
- \_\_\_\_\_ PRINT OUT OF BEST SC TIMES FROM USA SWIMMING WEBSITE STAPLED TO PAGE 9
- \_\_\_\_\_ PAGES 6-9 COMPLETED WITH SIGNATURES. (You keep pages 1-5 and 10)

### Email contact for pre-meet information:

#### Primary Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Email \_\_\_\_\_

#### Secondary Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Email \_\_\_\_\_

### Swimmers contact information; and/or parents; while at the meet

Swimmers Name \_\_\_\_\_

Swimmer's cell (if available) \_\_\_\_\_

Swimmer/family lodging \_\_\_\_\_

Parents cell \_\_\_\_\_

**SWIMMER'S COPY: PAGES 1-6**

**ZONE STAFF COPY: PAGES 7-11**