New England Swimming 2005 Long Course Zone Team

CHAPERONE APPLICATION FORM

The 2004 Eastern Long Course Zone Championships will be held at Erie Community College Flickinger Aquatic Center (13-14, 15-18) and at University of Buffalo Alumni Arena Pool (9-10, 11-12) in Buffalo, New York on August 10th – 13th, 2005. This form must be completed and returned to Laura Matuszak by July 31st, 2005 if you wish to be considered for a 2005 Long Course Zone Team Chaperone position. The Zone Head Coach (Laura Matuszak) and the Zone Coordinator (Ray Grant) will select the 2005 chaperones with the assistance of the New England Swimming Board of Directors by August 3rd, 2005.

ZONE TEAM CHAPERONE RESPONSIBILITIES

- 1. Attend scheduled team practices.
- 2. Attend any organizational meetings.
- 3. Actively participate in meet and hotel child supervision. Duties include the around-the-clock supervision of your assigned athletes, enforcement of curfews, enforcement of team trip rules, enforcement of safety rules.
- 4. Attend all team activities, meals, pool sessions and meetings.
- 5. Supervise the team at the pool and coordinate arrival, departure and meal times with the coaches.
- 6. Fulfill New England Swimming timing and officiating responsibilities.
- 7. Assist the coaches as requested.
- 8. Complete a SORI/CORI background check through the State of Massachusetts

Schedule

Depart Tuesday, August 9, 2005

Meet Wednesday, August 10 – Saturday, August 13, 2005.

Return Saturday, August 13, 2005 (some chaperones will return after trials on Saturday afternoon, some chaperones will return after finals on Saturday evening).

Mail Application to:

Laura Matuszak, 62 Laurel Hill Drive, South Burlington, VT 05403. lmatuszak@smcvt.edu OR drop off application at the New England verification table at the 2005 Summer Long Course Championship Meets

Personal Information	on (please print)						
NAME:							
Last		First			Middle		
ADDRESS:							
Street		City	State	Zip			
HOME PHONE:		BUSINESS PHONE:					
FAX NUMBER:		TEAM:					
E-MAIL ADDRESS							
TEAM APPAREL:	Sl	Shorts					
CHAPERONE PRE	EFERENCE (Please list your	order of preference 1-3)					
10 and Under	13 and Over						
11-12							
MEDICAL CERTII	FATION/EXPERIENCE						
TRIP FEE	\$100.00 per chaperone		·				
		Date of receipt			_		

Please complete the waiver form on the back to this application.

EASTERN ZONE ALL STAR SWIM MEET NEW ENGLAND SWIMMING August 10-13, 2005 Erie Community College Flickinger Aquatic Center and University of Buffalo Alumni Arena Pool in Buffalo, NY

Waiver of Liability

I hereby release New England Swimming, together with their operators, agents, employees, consultants, and instructors from any and all claims from injury or damage that may be sustained by me during participation in the Eastern Zone Age Group All Star Swimming Competition.

I represent hereby that I am in good health and capable of participating on the New England Zone Team and will not do anything which will injure me or others while engaged in the programs. I will hold New England Swimming harmless in connection with my participation.

represen	tative's pe	ermission to	obtain	medical	attention	and/or	required	treatment.
Signature_								
Date								_

If an accident or injury occurs, I will give New England Swimming or their