

Dear Athlete,

You have been selected to attend the 2016- 2017 South East Region Athlete Development programme. This year the programme will engage with 72 athletes, comprised of 36 males and 36 females in the 12 year old age group. Age is defined as at 31st December 2016. Each athlete will be required to attend two education days. These will take place at Wycombe Abbey School (4th Sept) and ACS International School, Cobham (17th Sept) The total cost of the programme is £50 per person, which will be used to directly cover staffing and facility costs. Swimmers must be able to commit to the full programme.

The syllabus for these camps has been prescribed by the nationally focused England Programmes team to ensure a seamless development pathway within the sport. Across the two camps, swimmers will undertake technical work on each of the four strokes and participate in ‘swim specific’ dry land training. They will also receive two educational workshops. **Parents are not permitted within the camp venue but are invited to attend the scheduled workshops noted on the timetables below.**

Each swimmer is required to bring the following equipment to each camp:

* Swimming Kit
* Land Training Kit (No fashion trainers)
* Short Blade Fins
* Small Kick Board/ Pullbuoy
* Snorkle **(Please ensure that you can use this competently prior to the camp)**
* Pen and Paper
* Food and Drink for the entire day (food is not provided) **Please ensure no foods contains nuts**

We cannot process any applications without all of the required documentation and payment as outlined below:

* Reply Slip
* Payment of £50 by cheque made payable to ‘ASA South East Region’ or BACS Transfer

 Account number: 11514679/ Sort Code: 40 – 32 – 19/ Ref: STC <ASA Number>

* Signed Code of Conduct
* Signed Statement of Fitness Form **(To be brought to the camp on the day. You will need a new form for the second camp).**

Forms can be handed in to the designated desk at the South East Region Age Group Championships between 10:00 and 13:00 on the 14th, 15th, 28th or 29th May 2015 at K2, Crawley.If this is not possible, please return via post to: ASA South East Office, Unit 1-4 Castle Road, Chelston Business Park, Wellington, TA21 9JQ, **no later than Tuesday 31st May 2016.**

**Swimmers must be registered as English to be eligible to attend.**

Any additional queries may be directed by email to lindsay.dunn@swimming.org.

Yours sincerely,



Lindsay Dunn

ASA England Programmes Officer

**Timetable**

**Wycombe Abbey School (4th September)**

**Abbey Way, High Wycombe HP11 1PE**

**Girls (Maximum 36)**

08:30 – 08:45 Registration Davies Sports Centre Foyer

08:45 – 09:00 Welcome Davies Sports Centre Dance Studio

09:00 – 09:15 Pre Pool Davies Sports Centre Dance Studio

09:15 – 09:30 Change

**09:30 – 11:00 Swim Session 1**

11:00 – 11:15 Change

11:15 – 11:30 Post Pool Davies Sports Centre Dance Studio

11:30 – 12:30 Land Training Davies Sports Centre Dance Studio

12:30 – 13:00 Lunch Davies Sports Centre Foyer

13:00 – 13:15 Pre Pool Davies Sports Centre Dance Studio

13:15 – 13:30 Change

**13:30 – 15:00 Swim Session 2**

15:00 – 15:15 Change

15:15 – 15:30 Post Pool Davies Sports Centre Dance Studio

15:30 – 16:30 Workshop Classroom AMS

16:30 – 16:45 Complete Feedback Sheets Classroom AMS

16:45 – 17:00 Debrief and Sign Out Classroom AMS

**Boys (Maximum 36)**

09:00 – 09:15 Registration Davies Sports Centre Foyer

09:15 – 09:30 Welcome Davies Sports Centre Dance Studio

09:30 – 10:30 Land Training Davies Sports Centre Dance Studio

10:30 – 10:45 Pre Pool Davies Sports Centre Dance Studio

10:45 – 11:00 Change

**11:00 – 12:30 Swim Session 1**

12:30 – 12:45 Change

12:45 – 13:00 Post Pool Davies Sports Centre Dance Studio

13:00 – 13:30 Lunch Classroom AMS

13:30 – 14:30 Workshop Classroom AMS

14:30 – 14:45 Pre Pool Davies Sports Centre Dance Studio

14:45 – 15:00 Change

**15:00 – 16:30 Swim Session 2**

16:30 – 16:45 Post Pool Davies Sports Centre Dance Studio

16:45 – 17:00 Change

17:00 – 17:15 Complete Feedback Sheets Davies Sports Centre Dance Studio

17:15 – 17:30 Debrief and Sign Out Davies Sports Centre Dance Studio

**09:15 – 10:15 Workshop to Girls Parents/ Guardians (1 adult per swimmer)**

 **Classroom AMS**

**10:45 – 11:45 Workshop to Boys Parents/ Guardians (1 adult per swimmer)**

 **Classroom AMS**

**Timetable**

**(ACS International School, 17th September)**

**Heywood, Portsmouth Road, Cobham KT11 1BL**

**Girls (Maximum 36)**

08:30 – 08:45 Registration Cafeteria, Sport Centre

08:45 – 09:00 Welcome

09:00 – 09:15 Pre Pool Dance Studio, Sports Centre

09:15 – 09:30 Change

**09:30 – 11:00 Swim Session 1**

11:00 – 11:15 Change

11:15 – 11:30 Post Pool Dance Studio, Sports Centre

11:30 – 12:30 Land Training Dance Studio, Sports Centre

12:30 – 13:00 Lunch Cafeteria, Sport Centre

13:00 – 13:15 Pre Pool Dance Studio, Sports Centre

13:15 – 13:30 Change

**13:30 – 15:00 Swim Session 2**

15:00 – 15:15 Change

15:15 – 15:30 Post Pool Dance Studio, Sports Centre

15:30 – 16:30 Workshop Cafeteria, Sport Centre

16:30 – 16:45 Complete Feedback Sheets

16:45 – 17:00 Debrief and Sign Out Cafeteria, Sport Centre

**Boys (Maximum 36)**

09:00 – 09:15 Registration Cafeteria, Sport Centre

09:15 – 09:30 Welcome

09:30 – 10:30 Land Training Dance Studio, Sports Centre

10:30 – 10:45 Pre Pool Dance Studio, Sports Centre

10:45 – 11:00 Change

**11:00 – 12:30 Swim Session 1**

12:30 – 12:45 Change

12:45 – 13:00 Post Pool Dance Studio, Sports Centre

13:00 – 13:30 Lunch Cafeteria, Sport Centre

13:30 – 14:30 Workshop Cafeteria, Sport Centre

14:30 – 14:45 Pre Pool Dance Studio, Sports Centre

14:45 – 15:00 Change

**15:00 – 16:30 Swim Session 2**

16:30 – 16:45 Post Pool Dance Studio, Sports Centre

16:45 – 17:00 Change

17:00 – 17:15 Complete Feedback Sheets

17:15 – 17:30 Debrief and Sign Out Cafeteria, Sport Centre

**09:30 – 10:30 Workshop to Parents/ Guardians (1 adult per swimmer)**

 **Interactive Learning Centre, Middle School Building**

**REPLY SLIP**

**Name:** …………………………..............................................................

**Date of Birth:** ……………....................……................................................

**Name of Club:** …………………………..............................................................

**ASA Number ………………………………………………………………………………….**

**Name of Parent/ Guardian: ....................................................................................**

**Parent/ Guardian Email: ....................................................................................**

**Parent/ Guardian Telephone: ....................................................................................**

**Name of Coach:** ……………………...................................................................

**Coach Email:** …………………………..............................................................

**Coach Telephone: ....................................................................................**

***I confirm that I wish to attend the ASA South East Regional Camps and I am registered as an English swimmer:***

*Signed (Athlete):* .........................................................................................

*Signed (Parent/Guardian):* .........................................................................................

*Signed (Coach):* .........................................................................................

*Date: .........................................................................................*



**SOUTH EAST PROGRAMMES**

**CODE OF CONDUCT**

**Objective and Scope**

The purpose of this document is to establish a set of guidelines and procedures, which outline the responsibilities and behaviour of both staff and swimmers who are attending the Regional Athlete Development Camps. Whilst it is specifically aimed at "away" trips where travel and accommodation are required, it is expected that the principles of the Code of Conduct should be followed at all events and training sessions.

**Code of Conduct**

Behaviour and Personal Conduct must at all times be of a high standard and reflect favourably on the sport, and the Programme. Language in public or relevant group situations must always be appropriate and socially acceptable.

Any team member who withdraws from the team following selection may be liable, if applicable, for the reimbursement of any costs incurred on behalf of that team member.

Consumption of alcohol is totally forbidden for athletes under age as defined by UK law. It must not be consumed by swimmers or staff members whilst en route, prior to, or following a competition event, training camp or team activities, without specific consent of the Team Manager. During competition alcohol is strictly forbidden to all swimmers and staff.

Smoking is prohibited by swimmers and staff whilst en route, prior to, during or following a competition event, training session or team activities.

Personal Appearance shall be appropriate to the circumstances and as indicated by the Team Manager. Team kit and equipment shall be worn as directed by the Team Manager when competing and training, when assembling or travelling, at official team functions or on other occasions as notified.

Attendance at all activities is expected unless agreed by the Team Manager. Throughout the duration of the trip swimmers should inform staff of their whereabouts. Punctuality on all occasions is essential and any curfew must be observed.

Illegal and Performance Enhancing Drugs and Substances are strictly forbidden. Swimmers are expected to be aware of the current list of banned substances and particular care must be exercised if anyone is on medication prior to or during a meet.

Illegal Drugs and Substances: The use of these, even though they may not appear on the official banned list in respect of performance enhancing drugs, is nonetheless prohibited.

Accommodation at hotels or equivalent must be as directed by the club staff and at no times must anyone extra be accommodated in swimmers’ rooms.

**Medication: It is important that information on all medication being currently taken should be reported to the Team Manager immediately on arrival at camp/event who will report it to the relevant personnel. Allergies to any medication must also be reported immediately to the Team Manager**.

**Sanctions:**

Breaches of the Code of Conduct shall be dealt with in the first instance by the Team Manager or Head Coach. He/she shall report the incident to the England Programmes Officer who shall take such further action as is deemed necessary.

In addition it is expected that all Swimmers, when attending any event or training session shall:

• Comply with the codes, rules and laws within the guidelines set out by the ASA

• Behave without discrimination on the grounds of race, colour, language, religion, birth or social status as set out in the equal opportunities policy.

• Respect the basic human rights, worth and dignity of each member.

• Not encourage swimmers, volunteers, officials or parents to violate the rules of the club/programme or the sport

• Observe the authority and the decisions of all officials.

• Encourage all swimmers to obey the spirit of the rules and laws both in and out of the pool

• Treat other competitors and teams with respect, in victory and defeat

Name (please print) ……………………………………………………………….………………....................

Signed ……………………………………………………………...................................................................

Date …………….……………...............................................................................................................

***For members under 12 years***

*As the parent/carer of the above named member, I hereby confirm that I have explained to them the contents and implications of this Code of Conduct.*

*Signed ……………………………………………(Parent/ Carer) Date …………….……………..................*

*Print Name…………………………………………………………………………………………………...........*

***Photography***

*The ASA wish to take photographs of group’s or individual’s participating in this camp. All photographs may be published within the ASA photographic policy.*

*If you* ***do not wish*** *for your child to be photographed please tick here:*

***Data Protection Statement:***

*The ASA will use your personal data for the purpose of your involvement in the England Programme and I understand that by submitting this form, I am consenting to receiving information about the England Programme by post, email, SMS/MMS, online or phone unless stated otherwise.*

*If you* ***do not wish*** *for your personal data to be used by the ASA please tick here:*

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**SOUTH EAST PROGRAMMES**

**STATEMENT OF FITNESS FORM**

**SWIMMERS NAME**:……………………………………………………………........................ (Please Print)

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian if swimmer under 16; swimmer if 16+) confirm that the swimmer named above is of good health and injury free and can, therefore, take a full and active part in the camp/training programme set out below:

**Location of Education Day:...................................................................................................................**

**Date of Education Day: .........................................................................................................................**

Please note any medical conditions including allergies:

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Please note any regular medication which you are currently taking:

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Please indicate any previous injuries or reasons for inability to train at any point in the 10 days leading into the camp. Please also complete the reverse of this form.

**Signed**:……………………………………………….. **Date**:……………………………….............................

**(Parent/Guardian if swimmer is under 16; swimmer if 16+)**

**Signed**:……………………………………………… **Date**:………………………………...............................

(***Home Coach)***

**NOTE**:

**On attending the camp, hand this statement to the Camp Team Manager on arrival**.

THE FORM BELOW MUST BE COMPLETED ALONG WITH THE STATEMENT OF FITNESS FORM:

1. **What injuries have you had over the last 12 months? Please draw on the picture below any painful areas.**
2. **Have you still got problems?**
3. **Have you had any treatment? If so what?**
4. **After training which areas feel sore more than once a week? Draw on the picture any areas you have soreness after training.**
5. **Do you normally breathe to the right, left or both sides?**
6. **How often do you land work each week?**
7. **Do you stretch after every training session and for how long?**

*Please be open and honest with your injury status. We need to know of any ongoing problems and of any problems that you may have with regard to your fitness***.**

**Areas identified as problems**



Please mark on the diagram any areas of pain or soreness…

**NOTES:** please write any relevant notes here that may help us to provide you with a suitable training programme to suit your needs.

If you are currently receiving treatment can you please provide contact details for your therapist below:

**Physiotherapist/Sports Therapist Name: …………………………………………………………………..**

**Physiotherapist/ Sports Therapist Email: …………………………………………………………….........**

**Physiotherapist/ Sports Therapist Tel: ................................................................................................**