

**2015 OZARK
SWIMMING ZONE
TEAM**

ATHLETE INFORMATION PACKET

Central Zone Championships

July 30-August 2, 2015

Topeka, Kansas

ATHLETE INFORMATION PACKET

GENERAL: The 2015 Central Zone Championships will be held in Topeka, KS on July 30th- August 2nd 2015. Pool events (July 31st- August 2nd) will be held at Capitol Federal Natatorium. Please read over the attached information and return all of the registration forms back by Wednesday July 1st, 2015. **You must complete the swimmer registration form, the code of conduct form, the uniform order form, (and if needed) the alternative travel / lodging application. Early registration is preferred and can be as early as May.**

We will only be able to take about 50 swimmers on the 1st bus. For this reason, the 1st50 athletes to qualify and register for the meet will get priority on buses. Swimmers who qualify/register after the first 50 may still be housed with the team, if rooms remain, will still receive the team uniform and will still be entered as normal. However, they will be required to find alternate travel arrangements to the meet. A second bus **may** be added if it is fiscally possible.

****NEW TO 2015 – THERE WILL BE NO TEAM TRAVEL FOR 10 & UNDER QUALIFIERS**

REGISTRATION: Swimmers need to return the completed application form and all other forms to the Head Zones Coach **by Wednesday July 1st, 2015**. These athletes will be guaranteed uniforms. **The Bus is first Come, First Served.** Any swimmer qualifying and/or registering after **Wednesday July 1st, 2015** will need to email Mark Imig at mimig@cspswim.com to begin the registration process. Swimmers qualifying after **Wednesday July 1st, 2015** need to either mail or hand deliver the forms to the Head Zones Coach as soon as possible. The absolute last day to register is Sunday July 26, 2015 by 8:00 PM. Swimmers who qualify and/or register after July 1, 2015 may have difficulty getting a uniform. In the past we have always been able to secure uniforms for all of our swimmers, but there are no guarantees. If we are not able to get the uniform for the meet, we will do our best to have athletes share in order to look like a team.

REGISTRATION DEADLINE: **Wednesday July 1st, 2015** by 5:00 P.M.

LATE REGISTRATION PERIOD: Thursday July 2, 2015 until Sunday, July 26, 2015. Athletes qualifying after Wednesday July 1, 2015 must contact Mark Imig to get registered for the team. Athletes qualifying during Long Course Champs or Sectionals must print out a registration packet and either hand deliver or mail it to Mark Imig, and the packet must be received before Sunday July 26, 2015. **Please note that late registrants are not guaranteed to receive all uniform items due to them being ordered by the middle of July.**

FINAL REGISTRATION DEADLINE: Sunday July 26, 2015 at 8:00 PM

ENTRIES: ***YOUR COACH WILL BE DOING THE ACTUAL ENTRY FOR SWIMMERS FROM HIS OR HER TEAM. YOU MUST NOTIFY YOUR OWN COACH TO ENTER YOU IN THE MEET. SEE THE QUALIFYING REQUIREMENTS IN THE PACKET FOR MORE INFORMATION. MAKE CERTAIN THAT YOUR COACH HAS ENTERED YOU IN THE MEET BEFORE YOU SHOW UP FOR DEPARTURE TO THE MEET.***

TRAVEL: The Ozark Team will again be traveling together as a team (except 10 & U athletes). The Ozark Age Group Committee will be requesting all other athletes to team travel. **Swimmers requesting alternate travel or lodging must fill out the application in this packet and enclose it with their registration.** We will be taking one bus (unless it becomes fiscally possible to add a second). **We will meet for departure on Thursday, July 30, 2015.** We will be returning to St. Louis on Sunday, August 2nd, 2015 (probably very early Monday morning).

UNIFORMS: This year's team uniform will include a bag, a jacket, 2 t-shirts, 1 pair of shorts, and two caps. You may purchase extra caps if you wish. You will be required to wear Ozark Team apparel at the meet. **Please do not bring any of your home team apparel.**

MEALS: Swimmers should bring a responsible amount of meal and spending money. (We suggest \$20.00 per day) **Team dinners on Thursday, Friday, and Saturday are included in the cost of the trip.** Swimmers will need money for lunches. The hotel does serve breakfast daily. Breakfast is included in the cost of the room.

COST: **Cost per swimmer is \$325.** This includes the entire team uniform, travel, lodging, and catered team dinners. Make checks payable to "Ozark Swimming." **Checks will not be cashed until late July; however, pulling out of the meet after the registration deadline will forfeit your money.**

Again this year, the cost of the trip includes the team jacket in the uniform package, all entry fees, and no-cost dinners on Thursday, Friday, and Saturday. Even swimmers not staying with the team are invited to the team meals at the hotel. Check with the Zones coaches for specific times.

NOTES: There will be a mandatory team warm-up and team picture taken for all swimmers on Thursday, July 30th, 2015 in Oklahoma City. Approximate times for pictures and warm up are listed in the itinerary. All team members are expected to stay throughout the entire meet unless other arrangements have been made with the Head Coach.

UPDATED INFO: Information will be updated via email once registration is received.

The following items are due back to Mark Imig no later than:
Wednesday July 1st, 2015

SWIMMERS & PARENTS:

- **PART #01** SWIMMER REGISTRATION FORM
- **PART #02** UNIFORM ORDER FORM
- **PART #03** CODE OF CONDUCT FORM
- **PART #04** APPLICATION FOR ALTERNATE TRAVEL/LODGING
(ONLY IF NEEDED)
- **PART #05** ATHLETE MEDICAL AUTHORIZATION FORM
- **PAYMENT \$325(OR APPLICABLE AMOUNT) PER SWIMMER;**
CHECKS MADE PAYABLE TO“OZARK SWIMMING”
- **ENTRIES-DON'T FORGET TO CHECK WITH YOUR HOME
COACH AND MAKE SURE YOU ARE ENTERED IN THIS MEET!**

SEND ALL FORMS TO:

Mark Imig, Head Zones Coach

667 Summer Top Circle

St. Louis, MO 63026

*****IF MAILING REGISTRATION, PLEASE FOLLOW UP BY EMAIL ABOUT A WEEK AFTER IT IS SENT TO MAKE SURE IT WAS RECEIVED. SOMETIMES MAIL IS NOT DELIVERED AND THERE IS NO WAY FOR THE HEAD COACH TO KNOW THAT UNLESS THERE IS FOLLOW UP*****

ATHLETE REGISTRATION FORMS – PART #01

OZARK SWIMMING 2015 ZONE TEAM

ATHLETE REGISTRATION FORM

YOU MUST SUBMIT ONE FORM PER SWIMMER

PLEASE PRINT LEGIBLY

FULL NAME: _____ MIDDLE INITIAL: _____

BIRTH DATE: ____/____/____ AGE ON 07/31/15: _____

HOME TEAM: _____ MALE / FEMALE: _____

ADDRESS: _____ CITY: _____

STATE/ZIP: _____

PARENT NAME(S): _____

HOME PHONE: (____) _____ BEST E-MAIL: _____

FATHER'S CELL # :(____) _____ MOTHER'S CELL #: (____) _____

ROOMMATE REQUESTS: _____

SPECIAL INFORMATION: _____

I WILL BE LEAVING WITH PARENTS AFTER MY LAST EVENT: Yes / No

**COST PER SWIMMER IS \$325--MAKE CHECK PAYABLE TO "OZARK SWIMMING"
Only 1 check is needed. Extra caps may be added to registration check.**

**ALL ATHLETES ARE ENCOURAGED TO TRAVEL TO TOPEKA AND STAY WITH
THE TEAM! IF YOU WOULD LIKE TO MAKE OTHER ARRANGEMENTS, YOU MUST
FILL OUT THE ALTERNATIVE TRAVEL/LODGING APPLICATION!**

ATHLETE REGISTRATION FORMS – PART #02

OZARK SWIMMING 2015 ZONE TEAM ATHLETE UNIFORM ORDER FORM

YOU MUST SUBMIT ONE FORM PER SWIMMER

This year, each member of the 2015 Ozark team will be receiving an Ozark team bag, 2 T-shirts, a jacket, shorts, and two caps. We are also giving swimmers an opportunity to order extra swim caps for trading with other teams. These caps will cost an additional \$3.00 per cap. Please note how many additional caps your swimmer would like. Check to cover purchased caps must be received with your order form (all charges can be on the same check). All order forms must be received by Wednesday July 1st, 2015. Please make checks payable to “**Ozark Swimming**”. Any swimmer who registers and/or qualifies after July 1st will need to turn in their order forms as soon as possible. We will do our best to outfit these swimmers in time for the Zone meet but cannot make any promises. If you have any questions, please email Mark Imig @ mimig@cspswim.com.

Swimmer's Name: _____ Home Team: _____

Home Phone: (_____) _____ Alternate Phone: (_____) _____

Each of the following items will be provided by Ozark:

UNIFORM ITEM	CIRCLE THE SIZE/CHOICE NEEDED
Team T-Shirts	Youth Size: Lag Adult Size: Sum Sum Med Lag XL
Team Jacket	Youth Size: Lag Adult Size: Sum Sum Med Lag XL
Team Shorts	Male / Female Youth Size: Lag (male only) Adult Size: Sum Sum Med Lag XL
Additional Caps	_____ X \$3.00 per cap*

*Enclose check made payable to “Ozark Swimming”

*Additional Cap money may be added to the same check

ATHLETE REGISTRATION FORMS – PART #03

2015 CODE OF CONDUCT

YOU MUST SUBMIT ONE FORM PER SWIMMER

PURPOSE

The purpose of this code is to promote the best possible team and individual impression at all times, and to acknowledge each individual's responsibilities as members of our team. Parents are expected to act in a similar way that does not incur a negative view of Ozark Swimming.

GENERAL CONDUCT (Part 1)

- 1) All participating team members shall abide by this code of conduct.
- 2) Curfews will be strictly obeyed unless participant has contacted the coach for an extension.
- 3) The use of alcoholic beverages is forbidden.
- 4) The use of drugs other than those prescribed by your physician is forbidden.
- 5) The use of tobacco products is forbidden.
- 6) The use of foul language and/or crude remarks is forbidden.
- 7) Indiscreet or destructive behavior will not be tolerated. Every effort should be made to avoid guilt by association with such activities.
- 8) Swimmers will treat their membership on the team as a privilege and personally acknowledge those responsibilities associated with it.

VIOLATION OF THE CODE (Part 2)

The coach and chaperone have the power to impose penalties for violation of the code. The penalties include, but are not limited to, the following:

- 1) The swimmer will be scratched from the meet.
- 2) The swimmer will be sent home immediately at his/her own expense.
- 3) The swimmer will forfeit his privilege of being a member of the team in subsequent years.

I hereby agree to abide by the rules of conduct set forth in Part 1 above and acknowledge that should I violate any provision of Part 1, I will be subject to disciplinary actions as set forth in Part 2, including suspension from future trips.

Signature of Swimmer_____

Date_____

Signature of Parent/Guardian_____

Date_____

ATHLETE REGISTRATION FORMS – PART #04

OZARK SWIMMING 2015 ZONE TEAM

APPLICATION FOR ALTERNATE TRAVEL / LODGING ARRANGEMENTS

YOU MUST SUBMIT ONE FORM PER SWIMMER

The Ozark Age Group Planning Committee strongly urges you to send your athlete on this trip with the rest of the team. The reasons for doing so include:

- Experience gained from a true “team travel meet”
- Opportunity to forge new relationships with other swimmers and coaches in the LSC
- Opportunity to develop self-responsibility habits

While we understand the reluctance of some parents to let their children take a trip on their own, keep in mind the Ozark Staff is a selective, highly qualified, and competent staff that has your child’s safety as our number one concern.

Alternate family travel causes some major planning conflicts and uncertainty among the staff and makes our jobs that much harder. Having to keep track of who’s on the roster, but not staying with the team, or who’s on the roster, but not on the bus but staying with the team can get quite confusing!

Please apply only if you truly have a valid reason for your swimmer having alternate travel and or lodging plans.

Swimmer’s Name: _____ Age: _____

Address: _____ DOB: _____

In Town Travel may be available for those not staying with the team for \$50 (Space limited)

I will NOT be traveling or staying with the team: _____ Owe: \$125

I have a 10 & Under Swimmer attending Zones: _____ Owe: \$125

I will be traveling with the team, **but** staying with parents or other arrangements: _____ Owe: \$200

I will NOT be traveling with the team, **but** I will be staying with the team: _____ Owe: \$225

My reasons for alternate travel / lodging are: _____

ATHLETE MEDICAL AUTHORIZATION FORM – PART #05

Swimmer's Name: _____

Parent(s) Names: _____

Phone #s--Father: Home (____) _____ Work (____) _____ Cell (____) _____

Mother: Home (____) _____ Work (____) _____ Cell (____) _____

Other Emergency Contact: _____ Phone (____) _____

Physician: _____ Phone (____) _____

Medication Currently Being Taken, Dosage, and Reason: _____

Known Allergies (Food or Medication): _____

Previous Hospitalizations, Surgeries or Serious Illness: _____

Does swimmer wear contacts/glasses? _____

Has any physician ever recommended that there should be any limits placed on participation in competitive sports?
If yes, please explain:

Please list any other useful information or health concerns: _____

Insurance Carrier/Group: _____

The above named child has our permission and consent to travel with Ozark Swimming Coaches. In the event of illness or injury to said child while traveling to or from or while participating in any such meet, and after an attempt has been made to reach the parents or guardian of the child informing them of such illness or injury, the Ozark Swimming Coach(es) is/are authorized to contract for and to authorize the treatment by a medical doctor for said child. In consideration for said child being permitted to travel with said party, we do hereby release and agree to hold harmless Ozark Swimming, the Coaches, Board of Directors and volunteers from any and all claims and liability, costs and expenses arising out of or resulting from the procurement of medical treatment for said child as aforementioned.

Executed this _____ day of _____, 2015

Signature of Father or Guardian _____

Signature of Mother or Guardian _____

2015 OZARK ZONE TEAM SELECTION PROCESS

THE PROCESS BY WHICH A SWIMMER WILL BE SELECTED TO THE 2015 OZARK ZONE TEAM

THIS MEET IS JULY 31ST through AUGUST 2ND, 2015

QUALIFYING PERIOD: **THE QUALIFYING PERIOD FOR THIS MEET IS AUGUST 1ST, 2014 THROUGH JULY 26TH, 2015.**

- 1) THE SWIMMER ACHIEVES A NATIONAL “AAA” LONG COURSE TIME DURING THE QUALIFYING PERIOD.
- 2) THE SWIMMER ACHIEVES A NATIONAL “AAA” SHORT COURSE TIME DURING THE QUALIFYING PERIOD.
- 3) DUE TO A SHORTAGE OF “AAA” SWIMMERS FROM OZARK IN AN EVENT, THE LSC ACCEPTS THE NEXT FASTEST NON-“AAA” QUALIFIER IN THAT EVENT. THE LIMITATIONS FOR THIS ARE: IN THE FOLLOWING AGE GROUPS: 10 & UNDER, 11-12, AND 13-14. THE LSC MAY ENTER UP TO **2 SWIMMERS** (PROVIDED THE LSC HAS **LESS THAN 2** “AAA” QUALIFIERS IN THAT EVENT.)

IF YOU HAVE ANY QUESTIONS ABOUT THIS PROCESS,
PLEASE CONTACT Mark Imig by e-mail: mimig@cspswim.com

BASIC TRAVEL ITINERARY
(Subject to Change)

OZARK SWIMMING ZONE TEAM

TUESDAY, JULY 28th, 2015

4:30-7:00 PM Team practice and dinner TBA

THURSDAY, July30th, 2015

6:30 AM	Departure to Topeka	
7:00 AM	Team departs from	
12:00 PM	Arrive in Topeka	Team Registration
1:00 PM	Team Picture	
1:15 PM	Team Warm Up	Catered Meet Dinner All LSC's

FRIDAY-SATURDAY, July 31st - AUGUST 1st 2015

6:00-6:40 AM*	Breakfast at hotel for 11 &Overs
6:40 AM*	Depart for Pool
7:00 AM*	Warm Ups
11:30 AM*	Bus takes 11 & Overs to lunch, then back to hotel
4:30 PM*	Bus takes 11 & Overs to pool for Finals
9:00 PM*	11 & Overs back to hotel for team dinner

SUNDAY, AUGUST 2nd, 2015

6:00-6:40 AM*	Breakfast at hotel for 11 & Overs
6:40 AM*	Depart for Pool
7:00 AM*	Warm Ups
11:30 AM*	Bus takes 11 & Overs to lunch, then back to hotel
3:30 PM*	Bus takes 11 & Overs to pool for Finals
9:00 PM*	Depart for St Louis; Dinner on the bus
1:30 AM*	Arrive at TBD

*****ALL TIMES ARE APPROXIMATE AND SUBJECT TO CHANGE*****

2015 ZONE TEAM CONTACT INFORMATION

OZARK SWIMMING

❖ **HEAD COACH: Mark Imig**

- E-mail: mimig@cspswim.com
- Address: Mark Imig, Head Zones Coach
- 667 Summer Top Circle
- St. Louis, MO 63026

➤ **TBD**(Team Departure and Return Point)

➤ **Capitol Federal Natatorium**

2751 Center Building Drive
Topeka, KS 66606

➤ **Athletes Hotel→Hyatt Place Topeka**

6021 SW 6th Ave
Topeka, KS 66615
(785) 273-0066

➤ **Parents Hotel→Hyatt Place Topeka**

6021 SW 6th Ave
Topeka, KS 66615

-**Booking Link:** <http://topeka.place.hyatt.com/topztozar2015.html>