### 17th Suffolk Swimability Meet - Rules and Conditions

#### **Eligibility**

This competition is open to any swimmer with a disability - physical, sensory or learning. Swimmers should indicate on the entry form their British Swimming/IPC classification. Where swimmers have not been classified, please leave blank. It is not necessary for swimmers to have been formally classified in order to compete at this event.

#### Rules

This competition will be swum under ASA Laws and Technical Rules, including ASA Technical Rules of Disability Swimming.

#### **Entry Restrictions**

In view of the fact that the event is subject to restricted pool time, the promoters will accept entries on a 'first come, first served' basis. Once the meet is full, all additional entries will be rejected.

#### Races

All individual races will be made up of swimmers with similar entry times, irrespective of their age, gender or disability. This is done in order to make races more competitive and increase the opportunity for swimmers to gain fast times. It is important therefore that accurate times are submitted on the entry form for all events. If no time is completed, then the swimmer will be placed in the slowest heat of that event. Swimmers requiring outside lanes may have to be swum out of time order to accommodate their needs.

Clubs wishing to enter the relay events should complete the separate relay application forms. No additional entry fee will be required if the swimmer is entered into an individual event.

Male and female swimmers may be swum together. Swimmers will be allowed to enter a **maximum** of 4 races, excluding the relays. For the 25m freestyle and backstroke, swimmers will be permitted to use a woggle if they wish. Whilst we will try to have all starts from the deep end of the pool, the organisers reserve the right to move the start to the shallow end if competitors need the hoist to enter the water.

#### Awards

Participation medals will be presented to all swimmers.

#### **Entry Fees**

The non-refundable entry fee is £3.00 per swimmer, irrespective of the number of events entered. If paying by cheque please ensure the correct fee is sent with your entry form. Cheques should be made payable to **Suffolk County ASA**. All entries must be received by Saturday  $23^{rd}$  March 2019.

If preferred Clubs may pay by BACS. Please ensure that your Club is prepared to make payment by this method and indicate accordingly on the application form.

#### **Epilepsy**

Swimmers with epilepsy must ensure that this is indicated on the entry form. A responsible adult who knows the swimmer's condition should accompany them. This person must act as a 'spotter' on the poolside while the swimmer is in the water.

#### **Photography**

All photography must be in accordance with current ASA guidelines.

#### Responsibility

Parents/carers are responsible for swimmers whilst in the changing rooms and on poolside prior to the start of the competition. Swimmers and spectators are reminded that property should not be left unattended at any time. Could swimmers please use the lockers provided.

Lifeguard cover will be provided throughout the meet.

#### **Promoters**

The promoters have the right to refuse entries and to make any changes that may be considered necessary for the smooth running and discipline of the event. There will be no access into the changing rooms or onto poolside before 5.45pm. The promoters will take into consideration the time needed for swimmers to change before commencing the event.

#### **Spectators**

Spectators will be able to use the balcony and the poolside seating areas - both are extremely hot, so please come prepared!

# 17th Suffolk Swimability Meet

Saturday April 13<sup>th</sup> 2019, 6.00 pm warm-up

Waterlane Leisure Centre, Lowestoft, Suffolk, NR32 2NH (Under ASA Laws and Technical Rules, including ASA Technical Rules of Disability Swimming)

(Under ASA Laws and Technical Rules, including ASA Technical Rules of Disability Swimming				
Please complete in CAPITALS				
MALE/FEMALE (delete as appropriate)				
Full Name	Date of Birth/			
Address				
	Post Code			
Telephone	E-mail			
British Swimming/IPC Classification if applicable				
Impairment Category				
Physical disability	Hearing impairment			
Visual impairment	Moderate/Severe Learning disability			
Difficulty speaking/ being understood	Autistic spectrum disorder			
Mental health condition	Affected in some other way			
Name of school attending				
taile of Stringling Clas afferding (if applicable)				
I declare that the above particulars are correct and agree to abide by the conditions laid down by the promoters.				
Signature of Swimmer				
Parent/Guardian (if under 1	8) Date			

			individual events Fraces (see prog	•	•
Events			D, 040,011,011,0		Medley
25m					
50m					
100m					
Do you hav	uire an outside e any of the fol	llowing? - Epilep Heart	sy Yes/No condition Ye	Asthma s/No	Yes/No
Do you hav	uire an outside e any of the fol  E £3 per swimm entry form (wit	lane? Yes/No llowing? - Epilep Heart er payable to Si th cheque if pay	sy Yes/No	Asthma s/No SA. Please se n) with a 9"x6	nd the
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HAVE YOU COMPLETED ALL THE SECTIONS?

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Mixed Freestyle Relay Entry Form

### Mixed Medley Relay Entry Form

Please complete in CAPITALS		Please complete in CAPITALS	
Name of Club attending		Name of Club attending	
Details of Competitors		Details of Competitors	
MALE/FEMALE (delete as appropriate)		MALE/FEMALE (delete as appropriate)	
Full Name		Full Name	/
MALE/FEMALE (delete as appropriate)		MALE/FEMALE (delete as appropriate)	
Full Name		Full Name	/ Date of Birth/
MALE/FEMALE (delete as appropriate)		MALE/FEMALE (delete as appropriate)	
Full Name		Full Name	/
MALE/FEMALE (delete as appropriate)		MALE/FEMALE (delete as appropriate)	
Full Name	/	Full Name	/ Date of Birth/
I declare that the above particulars are correct and agree to abide by the conditions laid down by the promoters.		I declare that the above particulars are correct and agree to abide by the conditions laid down by the promoters.	
Signature of Club		Signature of Club	
Representative		Representative	······································

# 17th Suffolk Swimability Meet

Saturday April 13<sup>th</sup> 2019 Waterlane Leisure Centre, Lowestoft, Suffolk, NR32 2NH

To be swum under ASA Laws and Technical Rules, including ASA Technical Rules of Disability Swimming

Promoted by Suffolk County ASA and kindly supported by Lowestoft Lions

Programme of events Warm up 6.00pm		
1	Individual Medley	100m
2	Freestyle (inc woggle)	25m
3	Backstroke	50m
4	Breaststroke	25m
5	Butterfly	50m
6	Backstroke	100m
7	Medley Relay	4x25m
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Continued			
8	Breaststroke	100m	
9	Backstroke (inc woggle)	25m	
10	Freestyle	50m	
11	Butterfly	25m	
12	Freestyle	100m	
13	Breaststroke	50m	
14	Freestyle Relay	4×50m	
Presentations will finish at approximately 9.30pm			





This meet provides an opportunity for all swimmers with a disability - physical, sensory, learning - to swim in a competitive setting over a range of distances and strokes, according to personal strengths and wishes.