

Central Swimming
Executive Meeting by Conference Call
Monday 6th of May 2013 @ 7.30pm

Present: Stu Woods (Chairperson) Sue Hewitt (HBPB), Bronwen Radford, Maryanne Roling (BOP) Lynelle Flynn (Administrator), Donna Bouzaid (Coach Rep), Andrew Woods (Taranaki), Simon Perry (Waikato), Jan Pook

Apologies: Keith Bone (HBPB)

Workshop notes: An amendment to the original notes to say the Relays to be 4 x 100 Open Free not 4 x 50 as previously noted.

As discussed at the workshop and ratification the shortfall from the Victoria State Champs is given back to the Regions. A letter to be sent to all families stating there was a shortfall and why.

Financial Position: Central Swim Exec has realized the need for such a position on our Board and has Co-opted Andrew Woods from Taranaki to undertake this role.

Internet banking. Yes there is a need for this for ease of making payments in the future. Agreed for Andrew Wood, Lynelle Flynn and Stuart Woods to have access to the accounts and make and authorize payments as agreed by the Executive on a monthly basis. Also agreed to have separate bank accounts for trips so a nil balance can be obtained after each event.

Financial Statement: as attached (1) and (2) and circulated for acceptance of payment with the inclusion of a refund for HBPB for a swimmer with good reason from the CS Long Course Champs for \$72.00
Hewitt/Roling

See the need moving forward to produce Annual Plans and Budgets and to factor in Administration costs. Andrew will assist with those.

No breakdown from the catering costs. Half was food and the other half for time spent at the meet preparing the food.

Long Course Championships: Stu to liaise with Waterworld as we will have to move the date to the 21-23rd of March to run along the same lines as the new Swimming New Zealand Calendar.

1. Current qualifying times are still OK.
2. Inclusion of the 4x 100 Relays as discussed at the workshop.

Coaches Workshop: Donna gave overview of discussion.

Coaches Panel is Pete McCallum, Noel Hardgrave-Booth, Ken Nixon and Sue Southgate with Donna the convenor of the group.

Initiatives for this coming swimming season of the Central Swim /Aqua Knights Team.

1. **Zonal Competition.** This team will be selected by the Coaches Panel. SNZ will provide the criteria for this event including how many of each gender per team, how many swims they are allowed to swim and also clothing for this event.
2. **Victoria State Champs** in December and in January 2014, **Victoria Open Champs.** A team will be taken to each of these meets. The relevant flyers full criteria to be circulated before the end of May. Expressions of interest are to be directed to the Administrator who will on-forward them to Donna.
3. At the same time of Victoria State Champs, a **Tri Series meet** will be held. Hosted by Swimming BOP with the assistance of Pete McCallum.
4. A flyer has also been drafted asking for **Team Managers for all of these events.** 3 for Tri Series, 1 for each of the Vic Champs trips dependant on numbers of swimmers. Expressions of interest forward to the Administrator and selected by Donna and Stu.
5. **Coaches** will be selected dependant on Fina points and number of swimmers attending from their squads.

Child Protection Policy: Central Swim will be adopting this and will be presented for the next meeting.

Fundraising/Sponsorship Sub Committee: We need a funding plan and how we are going to raise or obtain money for the Aqua Knights to compete in the above events. Budgets will be done and circulated for each event. Lucy has been volunteered by Waikato to assist with the possibility of obtaining a corporate sponsor.

Branding/Logo: Still in progress. Lucy/Lindsay working on this.

Central Swimming Website: Waikato will look into how much a website for Central Swimming could cost so we can factor that into our budget. One place to have all our information and have the Regions website directs a link to Central Swimming and vice versa. Central Swimming already has a facebook page.

Public Liability Insurance: Stu to liaise with Lucy re Waikato's Insurance policy and what it currently covers. Looking at one for the Directors of the Board as personal. Attached is the information sent to swimmers for the signature before the last Vic Champs trip. Do we need to fine tune this information? Are we covered enough with the forms we send out for our trips? Attached are the last ones. Feedback is welcome.

Meeting closed 9.15pm. **Next meeting Monday the 1st of July at 7.30pm by conference call.**

Accounts to be passed for payment at the meeting held on the Monday 6th of May

Accounts for ratification :

- Mihi School hire age of hall and rooms \$100
- Mihi FOMS for Catering \$640
- 2 x conference call costs @ \$25 each to Lynelle Flynn up to May call
- Reimbursement for printing from start of position to now \$162.90
- \$72.00 for Georgia Harris refund from CS Long Course Champs

Income and Expenditure Actuals for 2013 Central Swimming LC Champs

Income	\$		
Entry Fees	16,470.00		(1,816 ind entries compared with 1,515 in 2012)
Programme Sales	625.00		Comparable with
Other - fines etc	100.00		2012
Swim T3 - Fee	300.00		
Grant - NZCT	0.00		
	17,495.00		
Expenses	\$	\$	
Pool Hire	8,049.60		
Ribbons	1,004.81		
Medals	4,347.00		
Catering	1,200.00		
Printing costs	573.34		
AOD hire		\$1,650.00	Not charged by Swimming Waikato
Sound System hire		\$450.00	Not charged by Swimming Waikato
Admin		\$300.00	Not charged by Swimming Waikato
Sundry - postage	10.00		
Entry Fee Refunds	540.00		
	15,724.75		
Surplus	1,770.25		

Accounts Paid

The Rugby Shop	1,004.81	116679	13/02/2013	Ribbons
Emblems NZ Ltd	4,347.00	116680	12/02/2013	Medals
Cambridge SC	9.00	116681	Unpresented	Entry fee refund
Comet SC	9.00	116682	28/02/2013	Entry fee refund
Enterprise SC	18.00	116683	07/03/2013	Entry fee refund
Greerton SC	9.00	116684	15/03/2013	Entry fee refund
Swim Rotorua	9.00	116685	19/02/2013	Entry fee refund
St Peters	72.00	116686	28/02/2013	Entry fee refund - included a medical withdrawal
Taupo SC	54.00	116687	Unpresented	Entry fee refund - medical
Enterprise SC	99.00	116688	07/03/2013	Entry fee refund - medical
Swimming				
Taranaki	216.00	116689	04/03/2013	Entry fee refunds - included a medical
Jenny Lornie	1,200.00	116690	01/03/2013	Catering
Swimming				
Waikato	573.34	116691	19/03/2013	Printing costs
Fairfield SC	45.00	116692	Unpresented	Entry fee refund - medical
Swimming				
Waikato	8,049.60	116693	22/04/2013	Pool hire
Total	15,714.75			

cheque 116677 for \$150 cash for meet float presented
05/12/13.

Total cash \$775 banked along with entry fees 11/2/13. Recorded as \$625 programme sales with \$10 retained for sundry / postage etc



CENTRAL SWIMMING

TOUR AGREEMENT - CODE OF CONDUCT



AQUA KNIGHTS TOUR TO VICTORIAN AGE CHAMPIONSHIPS 2012

Rationale: The intent of this agreement is to promote a sense of purpose and pride in representing your Club, Region and the Central Swimming Regions.

Agreement:

Swimmers will undertake to:-

1. Co-operate with your coach, manager, team mates and opponents.
2. Conduct yourself in a sportsman-like manner and respect the rights and dignity of fellow swimmers, coaches, managers, officials and the achievement of opponents.
3. Refrain from any form of abuse, harassment, discrimination or victimization towards others.
4. To wear team uniform as requested at any time during the trip.
5. Not to possess, consume, administer, purchase or dispose of any narcotic or illegal drugs of any kind in any way.
6. Refrain from possessing, purchasing or consuming prohibited substances, while in a Central Swimming Camp or on tour.
7. Not consume or purchase alcohol and tobacco while on tour.
8. Comply with training, competition, curfew and behaviour requirements directed by Central Swim Management while in camp or on tour.
9. To inform the Team Management of any medical condition they need to be aware of.
10. Ensure that the Central Swimming Medical Form is completed, signed, and handed to the Team Manager prior to departure.
11. I acknowledge and understand that in the event of any breach of discipline or misbehaviour on my part, Central Swimming, through their appointed Manager, have advised me that I am liable for the following penalties:
 - a. to be sent home forthwith, any expense associated with this to be borne by Parents/Caregivers
 - b. to be deprived of any privileges or allowances
 - c. to be the subject of a report by the Team Manager
 - d. to be immediately suspended from current competition

Conclusion:

Travelling and staying together in a well-disciplined environment will build team spirit and this will be a sound basis for good performances in the pool.

I accept the conditions of the above agreement.

Signed _____ Competitor _____ Date

This signature must be countersigned by the competitor’s parent or guardian if under 20 years of age.

Signed _____ Parent/Guardian _____ Date



**CENTRAL SWIMMING
PERSONAL DETAILS / MEDICAL FORM**



THE FOLLOWING FORM SHALL BE COMPLETED BY EACH MEMBER OF A TRAVELLING SWIMMING TEAM, ASSISTED BY PARENTS OR GUARDIAN WHERE APPROPRIATE

TEAM MEMBERS FULL NAME (as per passport): (Please print clearly)

ADDRESS: _____

_____ **email:** _____

Team Members Ph _____ (Home) _____ (Mobile)

Club _____ School _____

Date of Birth _____ Nationality (as per passport) _____

Passport No _____ Expiry Date _____

Parent/Caregiver (1) Name _____ Hm Ph: _____

Mb/Bus _____ email _____

Parent/Caregiver (2) Name _____ Hm Ph: _____

Mb/Bus _____ email _____

CERTIFICATE OF HEALTH

1. Are you receiving attention from a doctor at present? Yes/No
 If the answer is yes, please attach a certificate from your Doctor indicating that you are fit to compete.

2. Are you allergic to any drugs, e.g. penicillin? Yes/No
 If yes please provide details:

3. Are you fully immunized against:
 a) Tetanus? Yes/No b) Hepatitis B Yes/No
 If no, have you had Hepatitis B? Yes/No

c) Meningococcal B Yes/No Are you a Hepatitis B Carrier? Yes/No

4. Do you suffer from any medical condition which the Team Management should be aware of? e.g. asthma, ear complaint, claustrophobia etc

If yes provide details _____

If you suffer from asthma please supply details:-

Do you take medication for asthma (circle) Daily /Only when necessary

Would you describe your asthma as (circle) Mild/Moderate/Severe

5. Are you on any regular medications? If so, please detail below:

If your child needs assistance with medication, please detail requirements:

6. Do you have any special dietary requirements Yes/No If yes provide details:

If Parents'/Guardian's address/contacts will be different whilst the team is on tour please state change of address:

Ph. No. _____ Mb _____

PARENT/GUARDIAN STATEMENT

I approve of my child being a member of the Central Swim Team travelling to Australia, and in the event of any accident or illness, I authorize the Team Management to obtain, on my behalf, such medical assistance as maybe required.

_____ Parent/Guardian Signature

_____ Date





SWIMMERS PROTOCOL

Swimmers from this area have established an outstanding reputation both domestically and internationally for the way its athletes have conducted themselves in competition, travel, accommodation, camps and their presentation to fellow athletes, officials and the public.

The following protocol will apply to all swimmers regardless of age and club affiliation.

- Swimmers are under the direct control of the Team Management
- Swimmers will travel and be accommodated as a Team.
- Leave from any area, must be cleared with Team Management.
- The consumption or purchase of alcohol, drugs, smoking of any description is strictly prohibited.
- Cell phones must not be used pool deck or during land/theory sessions.
- Cell phones will be asked to be handed in at night if found to be a disturbance to others trying to sleep.
- Be Positive.
- Respect the rights, dignity and worth of others.
- Be professional in, and accept responsibility for your actions.
- Conduct yourself in a sportsman like manner and respect fellow swimmers, coaches and managers
- Cooperate with your coach, manager and swimmers.
- Comply with training and behaviour requirements directed by Management

Any breach of the above Protocol or any part of it, will result in disciplinary action.





Travel Authorisation

Swimmers name:	
Home Address:	
Home Phone:	
Swimmers Mobile Number:	
Parents/Guardian Name:	
Swimmers Medical Alerts:	
Any special requirements:	
Medical Insurance Details:	

I authorise the Team Manager to seek medical attention should it be required
Signed: _____ Parent/Guardian

I _____ (Swimmers name) agree to follow the instructions and protocol as advised by the Team Manager and Coaches.

Signed: _____

Counter signed by Parent/Guardian: _____