

2019 SUMMER GAMES SEASON OVERVIEW - SWIMMING

EVENT DESCRIPTIONS

OFFICIAL EVENTS OFFERED:

1. SWIMMING

<i>Event Code</i>	<i>Event Description</i>		
SW25MDEV	Assisted Swim (District only, non-advancing)	SW25BK	25m Backstroke
SW15WK	15m Walk (District only, if depths permit, non-advan.)	SW50BK	50m Backstroke
SW15KB	15m Kickboarding (District only, non-advancing)	SW100BK	100m Backstroke
SW15US	15m Unassisted Swim	SW25BF	25m Butterfly
SW25MF	25m Freestyle	SW50BF	50m Butterfly
SW50MF	50m Freestyle	SW100BF	100m Butterfly
SW100MF	100m Freestyle	SW100IM	100m Individual Medley
SW200MF	200m Freestyle	SW4X25MF	4x25m Freestyle Relay
SW400MF	400m Freestyle	SW4X50MF	4x50m Freestyle Relay
SW25BS	25m Breaststroke	SW4X1CMF	4x100m Freestyle Relay
SW50BS	50m Breaststroke	SW4x25UF	4x25 Unified Freestyle Relay
SW100BS	100m Breaststroke	SW4X25MR	4x25m Medley Relay
		SW4X50MR	4x50m Medley Relay

ELIGIBILITY FOR SWIMMING SEASON COMPETITION

1. Valid Special Olympics Release Form and the Application For Participation in Special Olympics in the Headquarters office postmarked by **April 1, 2019** to remain valid through **the date of the Regional/District Tournament you are attending**.
2. To be eligible to advance to the State Summer Games, an athlete's Application for Participation must remain valid through **June 8, 2019**.
3. Athletes must have participated in at least eight weeks of official Special Olympics training prior to State competition.
4. At Regional tournaments and State Summer Games, athletes are eligible to compete in only one of the four sports offered. Agency quota will be based on the number of participating athletes, and advancement will be conducted according to Article I of the General Rules (see General Competition Policies).
5. An athlete in swimming may compete in a **maximum** of two individual events and two relay events as long as he or she has successfully qualified for each event. **Athletes registered for two relays may only be entered once in each relay event.**
9. SOWI will issue to each Agency a quota for State Summer Games athletics and swimming participation separately, based on the current year's Regional involvement. Every Agency must follow the advancement policies described in the General Information section of the Competition Guide to determine which athletes advance.

PLEASE READ FORMS CAREFULLY!

2019 DISTRICT SWIMMING REGISTRATION ATHLETE ROSTER

Please Print Clearly:

Agency Number: _____ Agency Name: _____

**Head Coach: _____ W: (_____) H: (_____) Fax: (_____)

Address: _____

(City) (State) (Zip)

E-mail: _____ **Cell phone contact number while at the Tournament:** (_____)

Additional email you would like games information sent to: _____

RETURN THIS FORM TO YOUR HOST REGIONAL OFFICE BY THE PUBLISHED DEADLINE DATE!

I have verified that all chaperones attending the tournament are approved SOWI Class A certified volunteers (check .

Number of coaches and chaperones that will attend the Regional tournament: _____ **Reminder:** athlete to coaches/chaperone ratio is minimum of 4:1

Will you be taking qualifying athletes to the State tournament? Yes No

**Registration information for this district event will be sent to the person listed as head coach.

Other events can be offered only at the district level; check with the host Regional office for details.

These times were taken in a pool with length measured in (check one) Meters Yards

Place a check [] next to the athletes who start in the water.

*Use best performance for the qualifying time

MAXIMUM: FOUR EVENTS • 2 INDIVIDUAL & 2 RELAY		IN- WATER START ✓	1ST EVENT	*QUALIFYING TIME	2ND EVENT	*QUALIFYING TIME	1ST RELAY	*QUALIFYING TIME	2ND RELAY	*QUALIFYING TIME
ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)			EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10
							RELAY TEAM NAME (15 CHAR. MAX)		RELAY TEAM NAME (15 CHAR. MAX)	
	<i>Example, John</i>	✓	<i>SW100MF</i>	<i>0:49.3</i>	<i>SW200MF</i>	<i>1:25.1</i>	<i>SW4X1CMF</i>	<i>3:45.2</i>	<i>SW4X25MR</i>	<i>2:20.3</i>
							<i>R1. Wave Runners</i>		<i>R2. Dolphins</i>	

(OVER)

Place a check [✓] next to the athletes who start in the water.

*Use best performance for the qualifying time

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			EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10
ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)							RELAY TEAM NAME (15 CHAR. MAX)		RELAY TEAM NAME (15 CHAR. MAX)	
1							R1.		R2.	
2							R1.		R2.	
3							R1.		R2.	
4							R1.		R2.	
5							R1.		R2.	
6							R1.		R2.	
7							R1.		R2.	
8							R1.		R2.	
9							R1.		R2.	
10							R1.		R2.	

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			EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10	EVENT CODE	MIN: SEC. 1/10
	ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)						RELAY TEAM NAME (15 CHAR. MAX)		RELAY TEAM NAME (15 CHAR. MAX)	
11							R1.		R2.	
12							R1.		R2.	
13							R1.		R2.	
14							R1.		R2.	
15							R1.		R2.	
16							R1.		R2.	
17							R1.		R2.	
18							R1.		R2.	
19							R1.		R2.	
20							R1.		R2.	