

Zone Team Chaperone Information and Application

Thank you for your interest in supporting our athletes for the 2015 Eastern Zone Long Course Age Group Championship Swim Meet in Richmond VA.

If you would like to attend the 2015 Eastern Zone Long Course Age Group Championship Meet to serve as a chaperone, please fill out the application in its entirety. All Chaperones must meet the Chaperone Criteria to attend. For individuals who are non-athlete members of USA Swimming the fee for attending is \$100.00. For individuals who are not members the fee is \$159.00 and the USA Swimming membership is included. All chaperones must fill out a Virginia Swimming Honor Code and are bound by USA and VSI Swimming Rules, Regulations and Policies. Criteria and links to initiate your USAS membership can be found at, Virginiaswimming.org, under Zone Team. Please do not make payment for the chaperone fee until you are selected.

| Name | | |
|--|----------------------|--------------|
| Address | _City | Zip code |
| Cell Phone () | _ Day Time Phone (|) |
| E-mail address | Club Team Affilia | ation |
| 1. What age group and gender is your athlete? | | |
| 2. Would you be interested in chaperoning an age group or gender other than your athlete's? | | |
| 3. Have you ever chaperoned for a Zone Meet, if so when? | | |
| 4. Are you a current member of USA Swimm | ing? | Membership # |
| Athlete Protection Exp | Background Screening | g Exp |
| 5. Are you a health care professional, yes or no, if yes, in what capacity? | | |
| 6. Are you a current USA Swimming official. | If yes, what leve | əl? |
| T-Shirt Size | | |
| The Team Manager will notify you via email AFTER Age Group Champs, if you have been selected to chaperone. It is understood that as a chaperone you agree to travel with the team for the entire trip and will enforce all team policies | | |

Please email scan this application to zoneteammgr@virginiaswimming.org