

2024 Summer Games Swimming Registration

Due: May 3rd

Local Program:
Local Coordinator attending this event:
Email:

*Please count only those participants and personnel for Swimming.

Participant	Meal Count	Overnight Count includes dinner&dance	Dinner& Dance only
Athlete			
Partner			

******Registration fee for this event: \$60.00. This is a 2-day event!**

Personnel	Meal Count	Overnight Count includes dinner&dance	Dinner& Dance only
Local Coordinator			
Coach			
Assistant Coach			
Chaperone			
Hometown Escort			

Forms are sent to:
Special Olympics CT
2666 State St., Suite 1
Hamden, CT 06517
OR by Secure Email
emilyp@soct.org

For information pertaining to Swimming registration and competition please contact Emily Pitney
203-230-1201x254

ALL PARTICIPANTS CERTIFICATIONS MUST BE CURRENT AT THE TIME OF REGISTRATION

Fairfield University and Oxford High School

SWIMMING SCHEDULE 2024

Tuesday, May 21 4:30PM		
DEVELOPMENTAL SWIMMING		
All events at Oxford High School		Event #
Coaches/Scratch meeting on pool deck		4:45 PM
15 Walk	25	
25 Floatation	26	
25 Freestyle Level 1	27	
10 Assisted Swim	28	
15 Unassisted Swim	29	
15 Floatation	31	
15 Kickboard	32	

Please be advised that times are always subject to change on any day

2024 HOUR	SATURDAY, JUNE 1 All events at Fairfield University	Event #	2024 HOUR	SUNDAY, JUNE 2 All events at Fairfield University	Event #
8:00 AM	<i>Coaches Meeting</i>		8:15 AM	<i>Warm Up</i>	
8:15 AM	<i>Warm Up</i>		8:30 AM	<i>Coaches Meeting</i>	
8:30 AM	400 Freestyle	1	8:45 AM	100 Breaststroke	13
9:00 AM	100 Backstroke	2	9:00 AM	25 Butterfly	14
9:15 AM	50 Freestyle	3	9:10 AM	100 Freestyle	16
11:00 AM	100 IM	4	9:40 AM	25 Freestyle	17
11:10 AM	25 Breaststroke	5	11:10 AM	50 Breaststroke	18
11:15 AM	4x25 Unified Medley Relay	7	11:20 AM	50 Backstroke	20
11:30 AM	50 Butterfly	8	12:00 PM	LUNCH	
12:00 PM	LUNCH		1:15 PM	4x25 Unified Freestyle Relay	21
1:15 PM	25 Backstroke	9	1:45 PM	4x25 Freestyle Relay	22
2:15 PM	200 Freestyle	10			
	200 Backstroke	10			
2:30 PM	4x50 Freestyle Relay	11			

All Local Programs must adhere to the following event category distribution process in order to ensure each athlete's full participation in the 2024 Summer Games.

Due: May 3rd

1. Athletes are restricted to participation within one category as outlined below.
2. Athletes may register for **TWO individual events** and **ONE relay event** -or- **THREE individual events** - or - **ONE individual event** and **TWO relays**.
3. Partners may register in two different relays, but not on two different relay teams in the same event.

Category	Swimming Event Selection
Category 1	All developmental events
Category 2	25 and 50 Meters in Freestyle, Backstroke, Breaststroke and Butterfly. ALL relays
Category 3	50 and 100 Meters in Freestyle, Backstroke, Breaststroke, and Butterfly. ALL relays
Category 4	100M, 200M, 400M Freestyle, 100M Backstroke, 100M Breaststroke 100M Individual Medley, 200 Backstroke, All Relays

Special Needs Codes	
OL	Outside Lane
L	Needs Ladder
VI	Visually Impaired
HI	Hearing Impaired
IWS	In Water Start
SE	Seizure/Epileptic
A	Lane Furthest away from start
WC	Wheelchair

DEVELOPMENTAL EVENTS: Oxford High

Code	Event
AQDV15WK	15M Walk
AQDV15FL	15M Float
AQDV15KB	15M Kickboard
AQDV25FL	25 Float
AQDV10AS	10M Assisted Swim
AQDV15US	15M Unassisted Swim
AQDV25MF	25M Freestyle

LEVEL EVENTS: Fairfield U

Code	Event
AQ25MF	25M Freestyle
AQ25BK	25M Backstroke
AQ25BS	25M Breaststroke
AQ25BF	25M Butterfly
AQ50MF	50M Freestyle
AQ50BK	50M Backstroke
AQ50BS	50M Breaststroke
AQ50BF	50M Butterfly
AQ1CMF	100M Freestyle
AQ1CBK	100M Backstroke
AQ1CBS	100M Breaststroke
AQ1CIM	100M Individual Medley
AQ2CBK	200M Backstroke
AQ2CMF	200M Freestyle
AQ4CMF	400M Freestyle
AQ1CFR	4x25M Free Relay
AQ2CFR	4X50M Free Relay
AQ1UFR	4x25M Free Unified Relay
AQ1UMR	4x25M Medley Unified Relay

Swimming Registration Form

Relay teams

Due: May 3rd

HEAD Coach Information

First/Last Name	Home Phone	Cell Phone	Email Address
Street/City/Zip			

Note: Athletes are restricted to participation within one category as outlined in the registration packet. Please list unified and traditional relays on this page.

Category	First/Last Name	DOB	M/F	A/P	Event	Time	Event	Time	Team Name

Instructions for Registering Personnel

Programs may not register more Head Coaches, Assistant Coaches, Chaperones, and Hometown Escorts than the number of registered athletes.

Local Coordinators: Each Delegation (Local Program) is allotted space for two Local Coordinators (LC).

Please list the LC responsible for overseeing the event Checklist page. Registration fees do not apply to the two Local Coordinators

Head Coach: Please list the Head Coach for each sport with their current contact information on each roster page.

Head Coaches are not listed on the Personnel page, but are listed on the housing form.

***See below for registration fee information.**

Assistant Coach: Please list Assistant Coaches with their current contact information on the personnel page and housing form.

***See below for registration fee information.**

Chaperone: Please list Chaperones with their current contact information on the personnel page and housing form.

***See below for registration fee information.**

Hometown Escorts: Please list Hometown Escorts on the Personnel Page. Hometown Escorts are individuals that delegations recruit to meet the team during the day. These individuals are not to be included in housing counts, nor to be put on the housing forms as they are not allowed to stay overnight.

***See below for registration fee information.**

Registration fees:

No registration fees will be charged for Personnel provided the Athlete to Personnel Ratio is adhered to. The ratio is as follows:

1:1 Athletes who use a wheelchair or athletes who are legally blind.

3:1 All other athletes.

Special circumstances (such as behavioral issues, medical, etc.), may require that you bring additional personnel for adequate supervision. These requests must be in writing and must be included with your registration packet. The LC will be notified if the request is granted.

Please note on the personnel page those who are group home staff and which day/days they will be in attendance.

Special Olympics Connecticut Swimming 2024

Roster changes and participant scratches will be accepted up until **TWO WEEKS** prior to the day of the event (**MAY 17th**). Please refer to the Dates To Remember sheet for the exact deadline. Participants added to your delegation **MUST** have all necessary paperwork on file at the State Office.

Delegation: _____

Please remove (**scratch**) from this delegation

Name:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____

Please add to this delegation:

Name

Event

Team Name *if applicable*

Name	Event	Team Name <i>if applicable</i>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____
6 _____	_____	_____
7 _____	_____	_____

Date: _____

Submitted By: _____