

## **ADDITIONAL SPORT REGISTRATION: SWIMMING**



If you are already registered for a sport, register for an ADDITIONAL SPORT by completing the form below:

## Athlete name:

Date of birth:

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**Country:** 

National organisation:

**Contact person name:** 

E-mail address:

**Current SU-DS registration number:** 

New sport:

Payment of €5 per new sport is payable

Email completed form to: registration@su-ds.org



## **DSISO DIVE START FORM (See GUIDELINE NOTES for details)**

The purpose of this form is to record the ability, or otherwise, of a named swimmer to safely and proficiently achieve a dive start from either the side or the starting block in competitive swimming or synchronised swimming events.

It is the responsibility of the coach/trainer who signs this form to ensure that the named swimmer is safe in performing the activities stated in the Dive Start Tests for DSISO.

Coaches must read the Flow Chart and Guidelines for the completion of this Form.

Coaches must make themselves aware of the requirements for medical clearance from AAI prior to commencing Dive Start training or to undertake the assessment.

Failure to produce this Form, correctly completed, prior to competing in any DSISO promoted Championship will result in the swimmer being to start all races in the water.

Swimmers Name DSISO Registration No
Country: Club:
Medical Evidence states "Clear of AAI" YES $\Box$ $\Box$ NO
NOTE: IF THE RESPONSE IS NO THEN THE SWIMMER MUST NOT DIVE
Does the Medical Evidence state "Symptomatic AAI"? YES $\Box$ NO $\Box$
NOTE: IF THE RESPONSE IS YES THEN THE SWIMMER MUST NOT DIVE
Assessment of Dive Start Test (SIDE) Pass  Fail Date of Assessment
Signature of Coach/Trainer:
Name of Coach/Trainer:Qualification:
Assessment of Dive Start Test (BLOCK) Pass  Fail  Date of Assessment
Signature of Coach/Trainer:
Name of Coach/Trainer:Qualification:
NOTE: Signature of Parent/Carer/Responsible person
Name Date
For Official Use: Received (Date)
Approved (Technical Director)