



The Elite Swimming Training Programme of the DMasa and Doncaster's Clubs  
[www.dartes.co.uk](http://www.dartes.co.uk)

## Welcome Letter to the Athlete

Welcome to Doncaster Darts SC. We hope you will have an enjoyable and happy time as a member of our swimming club and that you enjoy training and competing with us

Your parents have been provided with details which includes details of your training times. Your lane allocation will be based on your squads Lead Coach.

## Coaching

As a SwimMark Accredited club, we are committed to helping you swim, to enjoy your training, learn to train hard and to help you in reaching your potential. The coaches are here to help you do that and have been trained to do so in a safe and proper manner. You should soon get to know your coach and if you have any concerns about training do talk things over with your coach and your parents.

## Safeguarding

You may wonder what we mean by safeguarding. Essentially, alongside our wish for you to enjoy and succeed at your sport, we want to ensure that you are safe and happy at our swimming club and that we act upon anything that prevents that. That is what we call 'safeguarding our members'. You may ask what you are being safeguarded from. So for example we want to make sure you are not being:

- Bullied
- Treated differently to others
- Hurt by another person on purpose
- Not being listened to

Preventing such behavior is very important to us as a Swimming Club and to achieve that we have a safeguarding manual called Wavepower. If you want to have a look at Wavepower, the Welfare Office will have a copy that you can read or it can be viewed and downloaded from [www.swimming.org](http://www.swimming.org).

We know any bullying or poor behavior to you would make you feel unhappy, so please do not feel you have to just put up with it. While we will do all we can to prevent anything happening, it is important if something or someone causes you to be unhappy that you tell someone. Tell your parent, your coach, the welfare officer or any other adult you feel happy to speak to. Any issues you raise will be dealt with.

To assist you here are some helpful details of how you can raise concerns:

- Your welfare office is Natalie Cade and they can be contacted on [welfare.dartes@gmail.com](mailto:welfare.dartes@gmail.com)
- Swim England also have a helpline called Swimline if you want to tell someone but not anyone in the Swimming Club. The number is 0808 100 4001

You will be asked to leave a number at which you can be contacted in the next 48 hours. If you feel you cannot wait that long for someone to talk to you, hang on and you will be put through to the NCPCC/ChildLine helpline number who will answer your call immediately.

- Child Power is a section of the Swim England website just for young people like you. It has a message link so that you can send a concern in writing to the Swim England Child Safeguarding Team who will then help you with whatever issue you have raised.



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## Codes of conduct

Just as we expect others to behave properly to you, we expect all our members to behave in an appropriate manner to each other as well as their coaches, all helpers, and all adults and young people you have contact with in competitions. We have a code of conduct that you and your parents will be asked to sign and return to the Swimming Club. If you are unsure about any aspect of the code of conduct please feel free to ask.

The Doncaster Darts code of conduct can be viewed here – <https://www.doncasterdartes.co.uk/page/about/code-of-conduct>

We hope you will have a very happy and successful time while a member of Doncaster Darts SC



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## Welcome Letter to the Parent

Dear Parent,

Doncaster Darts SC welcomes you and your child(ren) to our club. We hope you will enjoy the experience of being a member including the training, competitions and the social interaction with all their fellow members. This letter will provide you with information that may be of assistance to new members. Please do ask me, the welfare officer, or any committee member or coach if you have other questions not covered in this letter.

Firstly who runs the club? A full list of the officers, committee members and coaches can be found on the notice board. Below is a list of some of those officers for your information.

Chairman: Gail Burton	<a href="mailto:chair.dartes@gmail.com">chair.dartes@gmail.com</a>
Club Secretary: Claire Matthews	<a href="mailto:information.dartes@gmail.com">information.dartes@gmail.com</a>
Child Welfare Officer(s): Natalie Cade & Adam Burton	<a href="mailto:welfare.dartes@gmail.com">welfare.dartes@gmail.com</a>
Competition Secretary: Carol Shepheard	<a href="mailto:meets.dartes@gmail.com">meets.dartes@gmail.com</a>
Treasurer: Ian Hunter	<a href="mailto:treasurer.dartes@gmail.com">treasurer.dartes@gmail.com</a>
Kit Officer: Mark Kearsley	
Head Coach: Rob Hudson	<a href="mailto:coaching.dartes@gmail.com">coaching.dartes@gmail.com</a>

We are a SwimMark Accredited Club and follow the guidance in Wavepower for child safeguarding, the ASA Code of Ethics and codes of conduct. While we hope your child will be happy and content at the organisation, sometimes questions, concerns or issues may arise.

If you have a question regarding coaching you should in the first instance approach your child's coach. Do so at a time convenient to you both and please do not go on poolside and interrupt training sessions. The coaches will be happy to arrange a time before or after training to discuss any training issues/our organisation has a dedicated meeting which is held where you can arrange an appointment to speak to the coach. (delete as appropriate).

Please ask the parent liaison officer for details.



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## Application Form

For members under 16 years of age

### Applicant's Details

Surname: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Parents' Details

Mother \_\_\_\_\_ Father \_\_\_\_\_

Surname: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name(s): \_\_\_\_\_ First Name(s): \_\_\_\_\_

Address (if different from above): \_\_\_\_\_ Address (if different from above): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Contact Details

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please also complete the following forms attached

1. Medical information form
2. Photography consent or refusal of consent form
3. The members' Code of Conduct
4. Anti-bullying pledge
5. Parent's Code of Conduct

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



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## Medical Information Form

To be completed by members aged 18 years or over, or by parents/carers of members under 18 years. Please delete 'Yes' or 'No' as appropriate and complete further details as necessary.

<b>Name of member</b>		<b>Date of birth</b>	

The Equality Act 2010 defines a disabled person as anyone with a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on his or her ability to carry out normal daily activities.		
Do you consider this child to have an impairment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes what is the nature of their disability?		
<input type="checkbox"/> Visual Impairment	<input type="checkbox"/> Learning disability	<input type="checkbox"/> Hearing Impairment
<input type="checkbox"/> Physical disability	<input type="checkbox"/> Multiple disability	<input type="checkbox"/> Other (please specify)
<b>Medical information</b> Please detail below any important medical information that our organisation needs to know. Such as allergies, medical conditions e.g. asthma, epilepsy, orthopaedic problems, any current medication, special dietary requirements and/or any injuries.		
Name of child's doctor and surgery		
Doctors phone number		

I understand that, in compliance with the Data Protection Act 1998, all efforts will be made to ensure that this information is accurate, kept up to date and secure and that it is used only in connection with the purpose and activities of the organisation. Information will not be kept once a person is no longer a member of the organisation. The information will be disclosed only to those members of the organisation for whom it is appropriate and relevant officers of the Amateur Swimming Association or British Swimming.



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## Child Photography Parental Consent Form

The Doncaster Darts SC may wish to take photographs of individual and / or groups of members under the age of 18 that may include your child during their membership of the Swimming Club. All photographs will be taken and published in line with the ASA Photography Guidance. The Swimming Club requires parental consent to take and use all photographs.

Parents have a right to refuse agreement to their child being photographed.

As the parent or carer of please complete the form below in respect of your child or children. Please note you can withdraw your consent in writing to the welfare officer at any time should you wish to.

- |                          |  |                                |
|--------------------------|--|--------------------------------|
| <input type="checkbox"/> | Take photographs to use on the Swimming Clubs secure website:  | Consent given/Consent refused* |
| <input type="checkbox"/> | Take photographs to use on the club's social networking sites:   | Consent given/Consent refused* |
| <input type="checkbox"/> | Take photographs to include with newspaper articles:   | Consent given/Consent refused* |
| <input type="checkbox"/> | Take photographs to use on the Swimming Clubs notice boards:   | Consent given/Consent refused* |
| <input type="checkbox"/> | Filming for training purposes only:  | Consent given/Consent refused* |
| <input type="checkbox"/> | Employ a professional photographer (approved by the Swimming Club) who will take photographs in competitions/galas/meets/events: | Consent given/Consent refused* |

Signed (parent/carer): .....

Print name: .....

Date: .....



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## Swimmers Code of Conduct

Please read the Swimmers code of conduct before proceeding

I understand and acknowledge that I have read and understood the DARTES Swimming Club, Swimmers Code of Conduct and agree to abide by it all times.

By signing the Swimmers Code of Conduct I acknowledge and abide by the rules.

Swimmers Full Name: .....

Signature of Swimmer: .....

Parent/carer signature: .....

Date: .....

## Parents Code of Conduct

Please read the Parents code of conduct before proceeding here

I understand and acknowledge that I have read and understood the DARTES Swimming Club, Swimmers Code of Conduct and agree to abide by it all times.

By signing the Parents Code of Conduct I acknowledge and abide by the rules.

Swimmers Full Name: .....

Name(s) of Parent/carer: .....

Signature of Parent/carer: .....

## Code of Conduct for Coaches, Assistants, Committee Members, Officials and Volunteers

Please read the swimmers code of conduct before proceeding

I understand and acknowledge that I have read and understood the DARTES Swimming Club, Swimmers Code of Conduct and agree to abide by it all times.

By signing the Code of Conduct I acknowledge and abide by the rules.

Full Name: .....

Signature: .....

Date: .....





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## Anti-Bullying Pledge

As a member of DARTES Swimming Club it is my duty to play my part in trying to make my club a place where everyone can feel safe from bullying.

I promise:

- To treat all members of the club with respect.
- To call fellow swimmers by their preferred name only.
- To avoid aggressive or offensive behaviour such as name-calling, giving dirty looks, sneering or isolating others.
- To refrain from telling lies, starting rumours or repeating gossip about others.
- Never to retaliate, but to report the incident to an adult.
- To report any incident of bullying behaviour that I may witness.
- To make new members to the club feel welcome and to be helpful to them.

I have read, understood and agree to abide by the Code of Conduct for young people and the Anti-Bullying Pledge of team DARTES.

Swimmers Full Name: .....

Signature of Swimmer: .....

Parent/carer signature: .....

Date: .....