

# Welcome to the 2022/2023 Winter Marlins Swim Team

It is the mission of Van Wert Marlins Swim Team to provide the youth of our community with a high-quality swim team and to promote the sport of competitive swimming in our area. We will create the opportunity for swimmers of all levels to develop mind, body, character and spirit and achieve the highest levels of personal growth as well as achievement in the sport.

This packet includes:

- Winter Information Sheet (keep for reference during the season)
- Winter Meet Schedule - TENTATIVE (complete & return by October 14)
- Health Information Form (complete & return by first day of practice)
- Sudden Cardiac Arrest Info. & Signature Form (read, sign & return by Oct. 14)
- Concussion Info. Sheet & Signature Form (read, sign & return by Oct. 14)

Who are the Marlins Swim Club Boosters?

“The purpose of the Booster Club shall be to support, through programs and other activities, the Van Wert Marlins Swim Club and competitive swimming and diving generally in the Van Wert, Ohio area.”

“The parent(s) or guardian(s) of a swimmer or diver participating in Van Wert Marlins Swim Club programs shall become and remain a Booster Club member.”

Booster Board Members:

President: Anita Smith

Secretary: Kylee Moody

Treasurer: Danni Chiles

At large members: Meghan Dicke, Emily Holiday, Adam Houg, Mary Kramer (WOAL Rep), Matt Kramer, Kyle Smith, & Alexis Stoller

## Van Wert Marlins Swim Team Winter 2022/2023 Information

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**Coaches:** Danni Chiles 419-771-9564 [vanwertmarlins@gmail.com](mailto:vanwertmarlins@gmail.com) & Jeff Rex [jeffreymichaelrex@gmail.com](mailto:jeffreymichaelrex@gmail.com)

**Practice Schedule:** Beginning October 3, 2022

- All ages: Monday, Tuesday & Thursday 4:00-5:00 p.m.
- All practice schedules are subject to change depending on numbers and pool availability.

**Fee:**

- **\$250 per swimmer payable to Van Wert Marlins Parent Booster Club.** Reduce the fee by \$50 per additional swimmer in the same family (\$200 second child, \$150 third, etc). High school swimmers who will only swim the beginning / end of season and switch to HS team, pay half: \$125
- **All fees need to be paid in full** to Danni Chiles, Treasurer by **Oct. 31.**

**Team Rules:**

- **No bullying behaviors, negative attitudes or negative talk will be tolerated at any time from swimmers or parents.** Be positive, encourage your swimmer and your teammates, support our team and be involved.
- **Listen to coaches.** A coach's job is to help swimmers improve and keep them safe. Both require the swimmer's respect and attention.
- **No parents or spectators are allowed on deck during practice.** It is distracting for the kids. Feel free to watch from the observation area upstairs.
- **Respect our YM facility, our team equipment and the facilities we visit for meets.** Clean up your trash or mess after a meet. Help keep our team equipment in good condition.
- **If you are sick, do NOT come to practice.** Not only could we spread the sickness to others but practicing when you are sick has no benefit for the swimmer.
- **At LEAST one parent/adult for each swimmer must volunteer at meets.** Parent help is crucial for swim meets. Please do your share to support our team. If you are a first time parent, ask for help and we will train you.
- **Swimmers should sit as a team at meets.** This makes it easier for coaches to find swimmers and makes it more fun for the kids.
- **All swimmers must be YMCA members.** For membership questions or information about YMCA scholarships, see Aquatic Director Martha Martin.

**Practice Equipment:**

- Snorkel - center mount with a purge valve like this:  
<https://www.swimoutlet.com/products/finis-swimmers-swim-snorkel-1221/?color=yellow>
- Girls **MUST** have one piece suits.
- Boys **MUST** have swim trunks – no cut offs. It is recommended boys wear a knee length “jammer” competition suit or a “speedo” style suit. Regular swim trunks are allowed but slow.
- Every swimmer should have 2 pairs of good goggles.
- Anyone with hair long enough to get in your eyes should have 2 swim caps.

**Meet Equipment:**

- Team suit is the *TYR Hexa in black/blue*. (Girls are offered in 4 different strap/back styles, any is fine)  
You do **NOT** have to buy the team suit but we do ask that you wear either **blue or black** for meets.
- Every swimmer is provided with a team cap that should be worn to swim at every meet.
- It is recommended that every swimmer have back up suits with them at meets in case of emergency.
- Do not machine wash (and NEVER machine dry) competition swimsuits. Hand wash and line dry.

**Attendance Requirements:**

- Attendance at all practices is not mandatory BUT the more you practice, the better you will swim.
- Attendance at all the meets is not mandatory, however, attendance is strongly encouraged. Swimmers must attend **3** meets to compete at the Championship Meet. Please attend as many meets as possible. Our attendance at meets, especially away dual meets, is crucial to the success of our league.
- Notify Danni as soon as possible if you have a schedule change for a meet. Meet lineups are due several days in advance of meets and if your child is in a relay it is very difficult to change those lineups.

**Communication:**

- Sign Up Genius (signupgenius.com) for meet volunteer sign ups. Look for email notifications and on Facebook.
- We have a Google Calendar with practice and meet schedules detailed. I can add you to sharing or the link is: <https://calendar.google.com/calendar/b/1?cid=dmFud2VydG1hcmxpbmNAZ21haWwuY29t>
- We will use the Remind app for schedule changes/cancellations and quick reminders. To sign up text **@dc3gg3** to **81010** or [www.remind.com/join/dc3gg3](http://www.remind.com/join/dc3gg3)
- Emails will be sent for all meet information and general communication.
- Facebook: Van Wert Marlins (join the group)
- Northwest Ohio YMCA Swim League website:  
[https://www.teamunify.com/Home.jsp?\\_tabid\\_=0&team=recnwoysl](https://www.teamunify.com/Home.jsp?_tabid_=0&team=recnwoysl)

**Swim Meet Packing List - suggestions/information:**

- Dual meets are generally 3 hours long. Invitationals are longer. Pack accordingly.
- Extra gear: goggles, swim suit, cap, towels, etc.
- Blanket & chairs (many times we are sitting in a gym away from the pool)
- Small games and things to keep the kids entertained during long days
- Healthy snacks and drinks/water
- Sharpies, highlighters and pens
- Cash for heat sheets and concessions if available
- Dry clothes including warm clothes (sweatshirt, sweatpants) because sometimes the gyms are cold.

# Van Wert Marlins Winter 2022-2023 Meet Schedule - TENATIVE

Swimmer Name: \_\_\_\_\_

Please check if your child will be available to attend the following meets and RETURN to Danni by Oct 15. If you are not sure, please mark YES with a "?". It is much easier to remove a swimmer from a meet then it is to add them.

DATE	Event/Location	YES	NO
10/22/2022	AWAY	_____	_____
10/29/2022	WAPAK INVITE	_____	_____
11/12/2022	HOME	_____	_____
11/19/2022	LIMA INVITE	_____	_____
12/10/2022	HOME	_____	_____
1/7/2023	SWIM-A-THON	_____	_____
1/14/2023	AWAY	_____	_____
1/28/2023	AWAY	_____	_____
2/11/2023	AWAY	_____	_____
TBD	8U Championship Meet @ Lima	_____	_____
TBD	9 & Over Championships @ BG	_____	_____
	Saturday	_____	_____
	Sunday	_____	_____

**Please initial each item below and sign to complete.**

\_\_\_\_\_ I give permission to the Van Wert Marlins to use pictures of my child for advertising/ recognition including local print /online media outlets & social media platforms such as Facebook.

\_\_\_\_\_ I have read and understand the information packet provided.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_



# Health Information Form

## Van Wert Marlins

Swimmer First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Age as of Dec 1, 2022 \_\_\_\_\_ Birthdate \_\_\_\_\_ Gender \_\_\_\_\_

YMCA Membership Type \_\_\_\_\_ Shoe size \_\_\_\_\_ (child or adult size)

Parent/Guardian First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_ Text? \_\_\_\_\_ N \_\_\_\_\_ Y

Parent/Guardian First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_ Text? \_\_\_\_\_ N \_\_\_\_\_ Y

### Emergency Contact Authorization

The following people should be contacted in case of an emergency, only if the parent/guardian cannot be reached, and are authorized to pick up the child:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Do you carry family medical/hospital insurance? \_\_\_\_\_ N \_\_\_\_\_ Y

Carrier \_\_\_\_\_ Policy/Group # \_\_\_\_\_

### Parent/Guardian Authorization

Some YMCA Programs may include physical activity that have inherited risk. As parent/guardian of this child, I recognize the inherent risk and agree to hold the YMCA, Van Wert Marlins Parent Booster Club, employees, and volunteers harmless from any and all claims. In the event my child needs medical attention for injuries received while participating in a YMCA program, I authorize YMCA staff to give my child reasonable first aid, and to arrange transport of my child to a health care facility for emergency services as needed. I hereby acknowledge that the YMCA will assume that either parent of child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise. I hereby release all pictures of my child taken by the YMCA for promotional purposes and programming materials including the YMCA website. I also support the YMCA Sports Philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership. \*YMCA includes Camp Clay Facility

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# Sudden Cardiac Arrest and Lindsay's Law Parent/Athlete Signature Form



What is Lindsay's Law? Lindsay's Law is about Sudden Cardiac Arrest (SCA) in youth athletes. It covers all athletes 19 years or younger who practice for or compete in athletic activities. Activities may be organized by a school or youth sports organization.

Which youth athletic activities are included in Lindsay's law?

- Athletics at all schools in Ohio (public and non-public)
- Any athletic contest or competition sponsored by or associated with a school
- All interscholastic athletics, including all practices, interschool practices and scrimmages
- All youth sports organizations
- All cheerleading and club sports, including noncompetitive cheerleading

What is SCA? SCA is when the heart stops beating suddenly and unexpectedly. This cuts off blood flow to the brain and other vital organs. People with SCA will die if not treated immediately. SCA can be caused by 1) a structural issue with the heart, OR 2) a heart electrical problem which controls the heartbeat, OR 3) a situation such as a person who is hit in the chest or a gets a heart infection.

What is a warning sign for SCA? If a family member died suddenly before age 50, or a family member has cardiomyopathy, long QT syndrome, Marfan syndrome or other rhythm problems of the heart.

What symptoms are a warning sign of SCA? A young athlete may have these things with exercise:

- Chest pain/discomfort
- Unexplained fainting/near fainting or dizziness
- Unexplained tiredness, shortness of breath or difficulty breathing
- Unusually fast or racing heart beats

What happens if an athlete experiences syncope or fainting before, during or after a practice, scrimmage, or competitive play? The coach MUST remove the youth athlete from activity immediately. The youth athlete MUST be seen and cleared by a health care provider before returning to activity. This written clearance must be shared with a school or sports official.

What happens if an athlete experiences any other warning signs of SCA? The youth athlete should be seen by a health care professional.

Who can evaluate and clear youth athletes? A physician (MD or DO), a certified nurse practitioner, a clinical nurse specialist, certified nurse midwife. For school athletes, a physician's assistant or licensed athletic trainer may also clear a student. That person may refer the youth to another health care provider for further evaluation.

What is needed for the youth athlete to return to the activity? There must be clearance from the health care provider in writing. This must be given to the coach and school or sports official before return to activity.

All youth athletes and their parents/guardians must view the Ohio Department of Health (ODH) video about Sudden Cardiac Arrest, review the ODH SCA handout and then sign and return this form.

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Parent/Guardian Signature

-----  
Student Signature

-----  
Parent/Guardian Name (Print)

-----  
Student Name (Print)

-----  
Date

-----  
Date

# Concussion

## INFORMATION SHEET



**CDC HEADS UP**  
SAFE BRAIN. STRONGER FUTURE.

This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

### What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

### How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
  - Work with their coach to teach ways to lower the chances of getting a concussion.
  - Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
  - Ensure that they follow their coach's rules for safety and the rules of the sport.
  - Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



**Plan ahead.** What do you want your child or teen to know about concussion?

### How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

#### Signs Observed by Parents or Coaches

- Appears dazed or stunned
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events *prior to* or *after* a hit or fall

#### Symptoms Reported by Children and Teens

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness, or double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Confusion, or concentration or memory problems
- Just not "feeling right," or "feeling down"

**Talk with your children and teens about concussion.** Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious, or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*



[cdc.gov/HEADSUP](http://cdc.gov/HEADSUP)

## CONCUSSIONS AFFECT EACH CHILD AND TEEN DIFFERENTLY.

While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' healthcare provider if their concussion symptoms do not go away, or if they get worse after they return to their regular activities.

### What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other
- Drowsiness or inability to wake up
- A headache that gets worse and does not go away
- Slurred speech, weakness, numbness, or decreased coordination
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching)
- Unusual behavior, increased confusion, restlessness, or agitation
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously

**Children and teens** who continue to play while having concussion symptoms, or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious, and can affect a child or teen for a lifetime. It can even be fatal.

### What Should I Do If My Child or Teen Has a Possible Concussion?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a healthcare provider and only return to play with permission from a healthcare provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's healthcare provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a healthcare provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a healthcare provider.

To learn more, go to [cdc.gov/HEADSUP](http://cdc.gov/HEADSUP)



**CDC HEADS UP**



**Discuss the risks of concussion and other serious brain injuries with your child or teen, and have each person sign below.**

Detach the section below, and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injuries.

I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete's Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Athlete's Signature: \_\_\_\_\_

I have read this fact sheet for parents on concussion with my child or teen, and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian's Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian's Signature: \_\_\_\_\_