



CYPRUS TRAINING CAMP 2017

PARENTS' INFORMATION

All completed forms, passports, EHIC cards and spending money must be given to Julie Evens or Paula English by 10th September please

Dear Parents,

TRAVEL

This year we are flying from Heathrow Airport. We will leave from Hitchin Swimming Pool Car Park by coach (Cozys). All flight tickets and passports will be retained by the chaperones for check in. We will move through the airport as a group. Swimmers will be given a named chaperone who will be their group leader for both the outward and return flights. You must make sure that your child understands the importance of listening to and following instructions from their group leader or any of the coaches/chaperones attending the camp at all times.

Note: If your swimmer suffers from travel sickness please ensure that they have taken the appropriate medication in good time before we leave Hitchin.

MEETING TIME FOR DEPARTURE

Thursday 19th October 2017 **7.00 AM** Hitchin Swimming Pool Car Park.

FLIGHTS WITH BRITISH AIRWAYS

Hold Luggage allowance 20 kg. Your child **MUST** be able to carry their own luggage.

Please make sure the suitcase is not overweight. Checking in as a group is time consuming and we don't want to be repacking bags at the check in counters.

Hand luggage – 1 item, no more than 5kg – please observe the airport security rules regarding liquids.

Swimmers should take one set of swimming kit (goggles/suit/trunks) in their hand luggage in the hopefully unlikely event that their luggage does not arrive!

FOOD FOR TRAVEL

We suggest that you provide something light for your child to eat at the airport. Remember that drinks cannot be taken through security so please provide your child with some money to buy a drink and maybe some more food at the airport for the plane and for the coach journey in Cyprus. British Airways will provide a meal on the plane. Dinner will be available on arrival at the hotel.

If your child has any special dietary requirements please let us know.



FLIGHT DETAILS

Outgoing: Thursday 19th October BA662 departing London Heathrow to Larnaca at 11:45.

Incoming: Thursday 26th October BA663 arriving London Heathrow 22:25.

Estimated return arrival at Hitchin Swimming pool by coach is 00:30 on Friday 27th October.

You will be contacted by phone/text on the number you supply, by the UK based emergency contact, Paula English (07740 512729), as to our anticipated arrival time. We will also call her if there are any expected delays.

Swimmers are all expected to travel in Club Kit: polo shirt, hooded sweatshirt, navy/black tracksuit trousers and clean trainers, plimsolls or similar on both journeys. Named Cyprus 2017 polo shirts will be provided. Sports Abroad will provide a drinks bottle.

Swimmers and staff must have a named Club hooded sweatshirt. If you had one for a previous Cyprus camp, that can be used. If you already have a Club hoodie (Blue/Yellow), that can be worn even if it doesn't say Cyprus. Current Club approved sweatshirts are available from Kustom Clothing and must be named. You can also ask for "CYPRUS" or "CYPRUS 2017" to be embroidered on a new or old sweatshirt.

Under no circumstances is any medication (except prescribed asthma inhalers) to be held by the swimmers or placed in hold luggage. This is not only for your swimmer's safety but for that of the whole group and for other teams at the camp. Any medical information given to us will be treated in confidence and medication will be administered discretely if required.

Please give Julie or Paula any current medication including travel sickness pills at least one week before travel. Please make sure it is named with clear instructions and that any liquids are in plastic bottles of less than 100ml. We are required to take this in hand luggage.

CODE OF CONDUCT

Please ensure your swimmer re-reads the Code of Conduct and Social Media Code of Conduct before we go.

Please contact admin@hitchinswimmingclub.co.uk if you have any further queries or concerns.

Hitchin Swimming Club Committee



TWITTER

You can follow the camp on Twitter.

A dedicated Twitter account just for the camp has been set up at

@hsc Cyprus2017

Follow to get updates before and during the camp.

In order to ensure that it remains confidential to parents and swimmers of HSC only, your application to follow will require approval which may take a couple of days.



CORAL BAY, PAPHOS, CYPRUS

Thursday 19th October - Thursday 26th October 2017

PARENTAL CONSENT

I give consent for (Name of swimmer) to travel with Hitchin Swimming Club and to take part in the above event as described in the invitation letter.

I acknowledge that the club will be liable in the event of any accident *only if they have failed to take reasonable steps in their duty of care for my child during the trip*. I understand that the staff has a common law duty to act in the capacity of a reasonably prudent parent.

I confirm that I have advised my son/daughter that throughout the trip he/she must accept the instructions of any of the appointed HSC Team Staff who will be accompanying the team.

SIGNATURE (Parent / Guardian)

NAME

ADDRESS

DATE

EMERGENCY CONTACT INFORMATION

During the week of 19th – 26th October 2017, I/We can be contacted as follows:

Name & Relationship

Home/work/mobile

Name & Relationship

Home/work/mobile

PLEASE COMPLETE & RETURN ALL FORMS TO JULIE EVENS OR PAULA ENGLISH BY 10th September 2017



CORAL BAY, PAPHOS, CYPRUS

Thursday 19th October - Thursday 26th October 2017

CONFIDENTIAL MEDICAL INFORMATION

Name of Swimmer	
Address	
GP Name & Address	
GP Telephone Number	
Does your child have an existing medical condition?	Yes / No If Yes, please give details below (if you need further space, please use a separate sheet)
Does your child have any known allergies, eg. food, medication, plasters etc?	Yes / No If Yes, please give details below
Date of last Tetanus injection	



CORAL BAY, PAPHOS, CYPRUS

Thursday 19th October - Thursday 26th October 2017

CONFIDENTIAL MEDICAL INFORMATION

Please complete all sections of this form.

SWIMMER'S NAME

REGULAR MEDICATION

Please give details of any regular medication that your swimmer will need to take during the training camp:

Condition	Medication	Dosage	How often?
Allergies (please specify)			
Asthma			
Other conditions (please specify)			

If your child uses an inhaler this should be named and kept by the child in their hand luggage for use during travel.

If you have a spare inhaler, this can also be provided. It will be kept in the medical bag which goes everywhere with the squad and can be given to the swimmer for use as required.



CORAL BAY, PAPHOS, CYPRUS

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CONFIDENTIAL MEDICAL INFORMATION

Please complete all sections of this form.

SWIMMER'S NAME

Hitchin Swimming Club staff will take supplies of painkillers, antihistamine tablets and cream, diarrhoea tablets etc. Please indicate below if you are happy for us to administer such medication if requested by your swimmer, giving appropriate dosages:

Medication	Can this be administered?	If Yes, please state dosage	If Yes, please state how often medication can be administered
Paracetamol	Yes / No		
Ibuprofen	Yes / No		
Antihistamine tablet / cream	Yes / No		
Diarrhoea relief	Yes / No		

DECLARATION

I/we undertake to inform the Lead Chaperone for Cyprus 2017 if the person named above or any member of their family or other person with whom he/she has had close contact is known to have any infectious disease within 21 days prior to the camp. If within 2 days prior to departure he/she becomes ill, he/she should be seen by a doctor and the Lead Chaperone must be informed and may require a letter from the doctor confirming fitness to travel and swim.

SIGNED.....Parent/Guardian



CODE OF CONDUCT

I, (name of swimmer) confirm that I have read the Hitchin Swimming Club Code of Conduct and Social Media Code of Conduct and agree to be bound by its rules and any rules and regulations which are communicated to me before and during the Camp 2017.

I will respect the coaches, staff and other HSC squad members or visiting team members, the general public, flight staff, hotel guests and hotel staff and conduct myself in such a way to uphold the high reputation of HSC which the club has established over the years of attending this Camp.

I understand that any misbehaviour will be dealt with appropriately during the camp and may be reported during the camp or on return to my parent or guardian.

Signed by: **(Swimmer)**

Date:

Print name:

Signed by: **(Parent)**