



I. M. X T R E M E C H A L L E N G E

Monday, October 21, 2013

Dear Selected NCS IMX CAMP PARTICIPANT:

Congratulations on your acceptance to the NC Swimming IMXtreme Swim Camp to be held in Greensboro on January 4-5, 2013. In this camp, you will have the opportunity to meet other swimmers from North Carolina, undergo swim and dryland training and have a great time interacting with coaches and swimmers. The camp will offer a lot of swimming education, both in and out of the water, and will cover many different subjects.

Attached is **(1)** The IMX Camp Application; **(2)** A Medical Authorization Form, and **(3)** A Camp Code of Conduct. Both forms must be completed mailed **prior to Wednesday, November 13, 2013** to: NCS Camp Coordinator, Jonathan Watson, 6766 Chauncey Drive, Raleigh, NC 27615. Swimmers must submit these forms in order to participate in the IMX Camp.

The IMX Camp Director will be Jay Dodson (starcoachjay@yahoo.com) who is in his 4th year of directing this camp, and the Head Coach will be Casey Charles (ECA) who is back for his 2nd year as Head Coach. Once your forms have been received, they will take charge of the camp and all its details. Coach Dodson will be in charge of the lodging, meals, transportation and all camp logistics. Jay will be selecting adult chaperones to assist him throughout the camp and will send out camp specifics to all participants as they are finalized. Coach Casey will be in charge of the workouts and will be directing the camp staff and their efforts with the athletes. We are also looking to have additional guests on hand to motivate our campers.

This will be the 4th consecutive IMX Camp event and we are hoping to completely fill all 120 camp spots this year. We hope many of you will be back for the Select Camp in Charlotte this April as well. Good luck and please contact us if you have any questions.

Jonathan Watson
01silversurfer@bellsouth.net

IMX CAMP – CONFIRMED PARTICIPANTS

The following athletes confirmed their participation in the IMX Camp by email in early October. If a confirmation was not received by email, you have until 11-1-13 to contact 01silversurfer@bellsouth.net to confirm your attendance, or else your spot will be offered to the next available athlete in the IMX Rankings.

BOYS – AGE 11

JJ Chapman (MOR)
Christopher Ghim (UN)
John Hollowell (RSA)
Michael Ivy (TAC)
Kenneth Lowe (SWIMMAC)
Hugh Svendsen (SWIMMAC)
Jake Thakur (TAC)
Luke Vlahos (TYDE)
Zack Whipple (SWIMMAC)
Carson Wickman (NCAC)

Did Not Respond:

Michael Moore (TAC)
Brian Thompson (TAC)
Tanner Hering (GSA)
Ry O'Connor (YOTA)
John Vess (YWNC)
Roarke Burton (RACY)
Jeff Echols (EAC)
Reid Mikuta (GSA)
Gator Pritchard (DUKE)

GIRLS – AGE 11

Abby Arens (MOR)
Adrianna Cera (MOR)
Andreea Cornea (YOTA)
Caroline Crouse (MOR)
Maddie Flickinger (SA)
Emma Gerden (SWIMMAC)
Darcy Hall (WAVE)
Chloe Harris (SWIMMAC)
Reagan Johnson (SWIMMAC)
Madison McGuinness (GYW)
Kensley Merritt (SWIMMAC)
Brooke Morgan (YOTA)
Omega Pinnix (GCY)
Kayla Schlitt (ASC)
Olivia Sutter (YWNC)
Haley Turner (MOR)
Ellie Vannote (SWIMMAC)

Did Not Respond:

Kenzie Campbell (ASC)
Nina Turcanu (YSST)
Meredith Riegler (CHY)

BOYS – AGE 12

Alex Adams (SWIMMAC)
Noah Diacumakos (TAC)
Ben Fenwick (SWIMMAC)
Dylan Fore (TYDE)
Ethan Knorr (RACY)
Jaden Kring (MOR)
Scott Lyons (SWIMMAC)
Cameron Miller (SWIMMAC)
Jami Rzepecki (SWIMMAC)
Zach Speerschneider (YOTA)
Kevin Wiltsey (SWIMMAC)
Andrew Zheng (CHY)

Did Not Respond:

Cothalee Watko (RSA)
Alex Eudy (SWIMMAC)
Robbie Eudy (SWIMMAC)
Mitchell Langston (TAC)
Thomas Hamlet (HPSC)
Micah McRae (CVAC)
Tren Oliver (SWIMMAC)
JJ Holt (MOR)

GIRLS – AGE 12

Riggan Ayscue (SWIMMAC)
Erynn Black (SWIMMAC)
Alison Burge (YBAC)
Mckenzie Campbell (GCY)
Amy Dragelin (SWIMMAC)
Ashton Gasper (MOR)
Abby Kriegler (ASC)
Ashley McCauley (MOR)
Jacqueline Misener (SWIMMAC)
Sarah Pilecki (TAC)
Peyton Whitaker (MOR)
Ashley Worden (TAC)

Did Not Respond:

Sophie Perez (NCAC)
Callie Blandford (MOR)
Olivia Carter (TAC)
Amanda Westle (ASC)
Vivian Wei (TAC)
Faith Hefner (YSST)
Lydia Plasser (EAC)

BOYS – AGE 13

Will Belote (MOR)
Tucker Cera (MOR)
John Day (TYDE)
Justin Haffner (MOR)
Rhys Kawaguchi (MOR)
Josh Legge (MOR)
Chris Lung (SWIMMAC)
Teddy Perelli (SWIMMAC)
Sean Quinn (MOR)
Chris Silver (MOR)
Piotr Tarala (YBAC)

Did Not Respond:

Levente Bathory (EAC)
Jordan Ren (NCAC)
Luke Johnson (SWIMMAC)
Brandon Dyck (YOTA)
Zach Brown (MOR)
James Reindl (CCS)
Beau Brauer (NCAC)
Connor Sept (DUKE)

GIRLS – AGE 13

Jaylyn Forrest (NCAC)
Sinclair Larson (SWIMMAC)
Ashleigh Lechner (YWNC)
Sophie Lindner (SWIMMAC)
Lillie Moore (MOR)
Lily Morrell (MOR)
Mary Pruden (YOTA)
Madeline Ross (MOR)
Katie Sanders (TAC)
Charlotte Watts (RSA)

Did Not Respond:

Uma Knaven (NCAC)
Julia Menkhaus (SWIMMAC)
Sophia Cherkez (YSST)
Caroline Hauder (SWIMMAC)
Anna Durak (YSST)
Kat Morrison (STAR)
Lauren Rush (SWIMMAC)
Fiona Duffy (SSS)
Grace Reeder (YWNC)

IMX CAMP APPLICATION

ATHLETE PARTICIPANT's NAME:

(FIRST NAME) _____ (MI) _____ (LAST NAME) _____

STREET ADDRESS:

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE (_____) _____ CELL PHONE CONTACT (_____) _____

MOTHER's NAME & EMAIL

NAME _____ EMAIL _____ PHONE _____

FATHER's NAME & EMAIL

NAME _____ EMAIL _____ PHONE _____

A confirmation of the receipt of all forms and payment will be emailed to the email addresses above by 11/30/13, so please be sure to print clearly and neatly. **Due to the manner of selection, there can be no refunds for swimmers who cancel their participation at this camp after the application has been received.**

CAMP PARTICIPANT'S USA SWIM ID # _____ (home coach will know)

PARTICIPANTS APPAREL SIZES (CHECK SIZE FOR EACH ITEM). Please note sizes are final and extra items are not available so please be sure to choose correct sizes.

T-shirt size (circle one):

Adult-SMALL Adult-MEDIUM Adult-LARGE Adult-XLARGE

Swimmer's Jacket size (circle one):

Adult-XSMALL Adult-SMALL Adult-MEDIUM Adult-LARGE Adult-XLARGE

Home Swim Club Name _____

Club Coach Name _____

Home Coach's E-Mail _____

PLEASE SEE THE ATTACHED medical authorization form and waiver which must be returned with your fee and this application by the deadline.

PLEASE RETURN THIS APPLICATION, ACCOMPANYING FORMS AND A CHECK PAYABLE TO "NC SWIMMING" FOR \$150 NO LATER THAN NOVEMBER 13, 2013 to:

NC SWIMMING IMX Camp
c/o Jonathan Watson, NCS Camp Coordinator
6766 Chauncey Drive
Raleigh, NC 27615

QUESTIONS:

- ◆ Please address **camp-specific** questions about the **IMX Camp** to the **Camp Director, Jay Dodson**.
- ◆ All **registration** questions can be directed to **NCS Camp Coordinator, Jonathan Watson** at **01silversurfer@bellsouth.net**.

North Carolina Swimming Camp Medical Authorization Form

Date ____/____/____ Athlete Name _____

IMX CAMP

I do hereby voluntarily consent to clinic care including routine diagnostic procedures, medical and/or surgical treatment by the physician assigned by the North Carolina Swimming camp staff or the physician and facility chosen for _____(athlete name).

I am aware that the practice of medicine and surgery is not an exact science and I acknowledge that no guarantee is to be made to me as to the result of the treatments or examinations by these persons or facilities.

Signature of Athlete

Date

Signature of Parent/Guardian

Date

Please include telephone numbers where a relative or guardian can be reached in case of an emergency:

Father (name) _____ Phone AM: (____)_____-_____
Phone PM: (____)_____-_____

Mother (name) _____ Phone AM: (____)_____-_____
Phone PM: (____)_____-_____

Legal Guardian: _____ Phone AM: (____)_____-_____
Phone PM: (____)_____-_____

Physician (name): _____ Phone: (____)_____-_____

Dentist (name): _____ Phone: (____)_____-_____

Medical Insurance (carrier): _____ Policy # _____

Allergies

Is there a history of skin or other untoward reaction or sickness following injection or oral administration (ingestion) of (please be specific, if YES):

- (a) Penicillin or other antibiotics YES NO
- (b) Morphine, codeine, Demerol (narcotics) YES NO
- (c) Novocain or other anesthetics YES NO
- (d) Aspirin, emperin, other pain remedies YES NO
- (e) Sulfa drugs YES NO
- (f) Tetanus, antitoxin or other serums YES NO
- (g) Adhesive tape YES NO
- (h) Iodine or methiolate YES NO
- (i) Any other drug or medication YES NO
- (j) Any foods (eggs, milk, chocolate, nuts, etc.) YES NO

Please list any foods to which you are known to be allergic: _____

- (k) Insect bites, bee stings, other _____
- (l) Other allergies not listed above _____

Drugs taken recently (within the last six months that the athlete has taken):

- (a) Cortisone YES NO
- (b) ACTH YES NO
- (c) Anticoagulants YES NO
- (d) Tranquilizers YES NO
- (e) Hypotensives (high blood pressure medicine) YES NO

Has the athlete ever received treatment for:

Asthma/Rheumatism, Rheumatic fever YES NO

Any other physical conditions of which we should be aware:

Does this athlete exhibit any shortcomings while training in the pool that our staff should be aware of prior to this athlete training at camp? If so, please list:

Please have the coach of the athlete above give a yardage range which the athlete above could be expected to swim at this time of year. This will help our staff be sure not to risk injury to the athlete. This athlete could be expected to average _____ yards per workout during this camp, signed Coach _____.

North Carolina Swimming Camp

Athlete Code of Conduct Form

The undersigned athlete participating in the NCS IMX CAMP agrees to abide by the standards of conduct outlined below in addition to those established by the staff at the camp location. Any additional guidelines regarding conduct will be presented at the first team meeting.

1. Camp curfews and meeting times will be adhered to by participants at all times.
2. All athletes are required to attend and participate in all team meetings and training sessions, unless excused by the Camp Director and/or Head Coach.
3. The possession or use of alcohol, tobacco or any non-prescribed drugs is prohibited.
4. All athletes are expected to follow the directions of the coaching staff and chaperones.
5. Failure to comply with the Code of Conduct may result in, but not necessarily be limited to, either or both of the following actions:
 - a. Athlete may not be allowed to participate in some or all team activities
 - b. Athlete may be sent home from the camp at his/her parent's expense.
 - c. Athlete may be brought before the NCS Board of Review for disciplinary action.
6. Upon notification of any violation of the Code of Conduct, a review committee, consisting of the camp coaching staff, a boy's captain and a girl's captain, shall promptly investigate the circumstances of the violation, notify the individual(s) charged and promptly determine what disciplinary action, if any, shall be taken.

I agree to abide by the Code of Conduct rules above as I have read them.

Athlete Signature

Date: ____/____/____

Parent/Legal Guardian Signature

Date: ____/____/____