

**NATIONAL MASTERS SWIMMING CHAMPIONSHIPS
ATHENS (GRE) 02-04.06.2023**

Dear Friends,

Hellenic Swimming Federation has the honor to invite you to participate to the National Masters Swimming Championships 2023. The competition is co-organized with the Region of Attica and will be held on **2-4 June 2023** in **Athens Olympic Swimming Center** (50m. Indoor pool, 8 lanes)

swimming
κολύμβηση

water polo
υδατοσφαίριση

artistic swimming
καλλιτεχνική κολύμβηση

diving
καταδύσεις

finswimming
τεχνική κολύμβηση

open water
μεγάλες αποστάσεις

TERMS OF PARTICIPATION

- i. Eligible to participate are swimmers, who are members of athletic swimming Clubs, affiliated to the H.S.F. holding a valid accreditation card.
- ii. Each club may participate with no limit to the number of swimmers in each event. Each swimmer may compete in up to four (4) total events and in up to two (2) per session.
- iii. Team events to be conducted on the total age of team members in whole years. Team will be consisted from swimmers – members of the same swimming club.
- iv. Foreign swimmers representing their clubs, are allowed to participate.
- v. Age shall be determined as of December 31 of the year of competition.
- vi. Masters competitors must be aware of the need of being well prepared and medically fit before entering into Masters Competitions. They shall assume full responsibility for the risks included in competing in such competitions. In consideration of their entry, they must agree to waive and release the Organizing Committee from any kind of liability for accidents, which may cause death, injury or property loss.

RULES AND REGULATIONS

The competitions will be conducted in open category, in final heats regardless of the age of the swimmers three

Heats will be based on the best performances that the swimmers have achieved from 1/1/2022 in 50m. pool

Λεωφόρος
Συγγρού 137
17 121 Νέα Σμύρνη
Τηλ. 210 98 51 020

137, Syngrou
Avenue
17 121 Nea Smirni
Athens Greece
Tel. 30 210 98 51 020

The National Masters Swimming Championships will be conducted in four sessions

- Friday 2.6.2023 afternoon start time 18:00
 - Saturday 3.6.2023 morning start time 09:00, afternoon start time 17:00
 - Sunday 4.6.2023 morning start time 09:00
- ✓ Results and awards ceremonies will be conducted according to respective categories.

Competition Rules and Regulations World Aquatics Competition rules as presented on the World Aquatics website and the World Aquatics Code of Ethics., will govern at the National Masters Swimming Championships.

CATEGORIES OF SWIMMERS

MINIMUM AGE LIMIT: 25 years

AGE DETERMINING DATE: The actual age of the competitor as of 31 December, 2023

AGE GROUPS (INDIVIDUAL EVENTS) MEN - WOMEN:

CATEGORY	AGE	DATE OF BIRTH
A' Cat.	25-29	1998-1994
B' Cat.	30-34	1993-1989
Γ' Cat.	35-39	1988-1984
Δ' Cat.	40-44	1983-1979
E' Cat.	45-49	1978-1974
ΣΤ' Cat.	50-54	1973-1969
Z' Cat.	55-59	1968-1964
H' Cat.	60-64	1963-1959
Θ' Cat.	65-69	1958-1954
I' Cat.	70-74	1953-1949
K' Cat.	75-79	1948-1944
Λ' Cat.	80-84	1943-1939
M' Cat.	85-89	1938-1934
N' Cat.	90-94	1933-1929

AGE GROUPS (RELAY EVENTS): Based on the total age of team members in whole years: 100-119,120-159,160-199,200-239,240-279,280-319,320-359...(in Forty-year increments as high as necessary)

EVENTS:

Freestyle : 50m, 100m, 200m, 400m, 800m

Backstroke: 50m, 100m, 200m

Breaststroke: 50m, 100m, 200m

Butterfly: 50m, 100m, 200m

Individual Medley: 200m, 400m

Relays: 4x50m Freestyle, 4x50m Medley,

4x50m Mixed Freestyle, 4x50m Mixed Medley

All events will be swum as timed finals

Entries

Each swimmer must hold a valid accreditation and health card and must agree in writing to waive and release the Organizing Committee from any kind of liability for accidents, which may cause death, injury or property loss.

Entries must be submitted the latest by Wednesday **24/5/2023** time **14:00** to: swimming@koe.org.gr.

Entry lists, warm up and start times will be circulated on the website www.koe.org.gr on Monday **29/5/2023**

Withdrawals will be submitted by Wednesday **31/5/2023**, to e-mail: swimming@koe.org.gr, Withdrawals to finals must be made no later than 30 minutes before the event.

ENTRY FEES

The participation fee for each swimmer is **40 €**, and must be paid to one of the following H.S.F. accounts:

- **NATIONAL BANK - IBAN:** GR66 0110 0800 0000 0804 8090 172
- **EUROBANK- IBAN:** GR82 0260 2770 0007 0020 1520 045
- **ALPHA BANK- IBAN:** GR15 0140 1470 1470 0232 0003 260
- **PIRAEUS BANK- IBAN:** GR91 0171 7270 0067 2716 3708 450

➤ Copy of the bank draft must be submitted together with the participation entries.

CLASSIFICATION

Classification points in individual events.							
1 st place	2 nd place	3 rd place	4 th place	5 th place	6 th place	7 th place	8 th place
9	7	6	5	4	3	2	1

PRIZES

- Individual events: Medals will be awarded to 1st to 3rd places (gold, silver and bronze) in each age group. Relay events: For relay events, medals will be awarded to 1st to 3rd places (gold, silver and bronze) in each age group (each member of the team will receive a medal.).
 - i. Cup to the 1st winner in overall classification – Men
 - ii. Cup to the 1st winner in overall classification – Women
 - iii. Cup to the 1st winner in overall classification – Men & Women

SPECIAL PRIZE

- To the older Man
- To the older Woman

- ***HSF reserves the right to modify the terms of this announcement, if it is necessary***
- ***HSF Swimming Rules for the period 2022-23 will apply***

NATIONAL MASTERS SWIMMING			
COMPETITION PROGRAM			
1st Session - Friday 2/6/2023 afternoon time 18:00			
1.	100m. BUTTERFLY		WOMEN
2.	100m. BUTTERFLY		MEN
3.	50m. BREASTSTROKE		WOMEN
4.	50m. BREASTSTROKE		MEN
5.	800m. FREESTYLE		WOMEN
6.	1500m. FREESTYLE		MEN
7.	200m. BACKSTROKE		WOMEN
8.	200m. BACKSTROKE		MEN
9.	4X50m. MEDLEY		Mixed (2 MEN & 2 WOMEN)
2nd Session - Saturday 3/6/2023 morning time 09:00			
1.	50m. BACKSTROKE		WOMEN
2.	50m. BACKSTROKE		MEN
3.	100m. BREASTSTROKE		WOMEN
4.	100m. BREASTSTROKE		MEN
5.	200m. FREESTYLE		WOMEN
6.	200m. FREESTYLE		MEN
7.	400m. IND. MEDLEY		WOMEN
8.	400m. IND. MEDLEY		MEN
9.	4X50m. FREESTYLE		WOMEN
10.	4X50m. FREESTYLE		MEN
3rd Session - Saturday 3/6/2023 afternoon time 17:00			
1.	100m. FREESTYLE		MEN
2.	100m. FREESTYLE		WOMEN
3.	200m. BREASTSTROKE		MEN
4.	200m. BREASTSTROKE		WOMEN
5.	50m. BUTTERFLY		MEN
6.	50m. BUTTERFLY		WOMEN
7.	800m. FREESTYLE		MEN
8.	1500m. FREESTYLE		WOMEN
9.	4X50m. MEDLEY		MEN
10.	4X50m. MEDLEY		WOMEN
4th Session - Sunday 4/6/2023 morning time 09:00			
1.	50m. FREESTYLE		MEN
2.	50m. FREESTYLE		WOMEN
3.	100m. BACKSTROKE		MEN
4.	100m. BACKSTROKE		WOMEN
5.	200m. BUTTERFLY		MEN
6.	200m. BUTTERFLY		WOMEN
7.	400m. FREESTYLE		MEN
8.	400m. FREESTYLE		WOMEN
9.	200m. IND. MEDLEY		MEN
10.	200m. IND. MEDLEY		WOMEN
11.	4X50m. FREESTYLE		Mixed (2 MEN & 2 WOMEN)

DECLARATION FORM

I, _____ hereby
declare that:

- I have a valid accreditation and health card
- I am aware of and appreciate the inherent risks involved in such competition
- I have recently been examined by a doctor.
- I am absolutely fit and healthy to participate in the above event.
- The Hellenic Swimming Federation is not liable for any personal injury or any injury inflicted to other contestants from my mistake before, during or at the end of the events, or for any loss or damage to personal belongings.
- I agree the event O.C. may use my photo, provided as a part of my official entry, for the use on an EVENT Accreditation Card, as well as for an athlete profile to be offered to any person concerned with, or displayed during the EVENT or any other event or activity
- I am fully aware and conscious that participation in competitions requires a perfect health condition and a high level of physical fitness. I acknowledge that I am personally and solely responsible to ensure that my health is not affected and that I do have the required level of training and fitness to participate in the EVENT. By participating in the EVENT, I confirm that I consider to be in a perfect health condition and that I have not received any information, including without limitation, advice by a physician or another person, that my health might be negatively affected or my level of fitness not be sufficient to participate in the EVENT
- I am fully aware and conscious of the potential risks involved in competition activities, be it during training or during the actual EVENT. I know and accept that when I engage in competitive activities, my physical integrity and, in extreme cases, even my life may be endangered. I acknowledge that it is my sole personal responsibility to assess whether any competition or training course, respectively the conditions thereof at the relevant time are too challenging for me
- To the fullest extent permitted by the applicable laws, I release the EVENT Organising Committee and their respective members, directors, officers, employees, volunteers, partners, contractors and agents as well as any other entities and persons involved with or participating in the EVENT from any liability (excluding gross negligence and willful misconduct) for any loss, injury, death, damage and costs incurred or suffered in relation to my participation in the EVENT or related training

- In respect of information about myself (“Personal Data”), I agree: a) to my Personal Data being collected by the EVENT Organising Committee and to such data being stored and used by the EVENT Organising Committee, and, where necessary, third parties, for the purposes of, and to the extent necessary in relation to, facilitating my participation in, and/or organising, the EVENT; b) to the transfer of my Personal Data to such third parties, and to the processing of such data and potentially any relevant sensitive personal data (including about unspent criminal convictions), as are necessary for security and other background checks in order for me to gain the necessary accreditation for the EVENT;
- The terms and conditions set forth above supersede any prior terms and conditions. They shall remain effective for as long as I participate in the EVENT unless otherwise specified in this Declaration Form. They shall also be binding on my heirs, successors, beneficiaries, next of kin or assigns who might pursue any legal action in connection with the same.

Name: _____

Passport / ID Card: _____

Signature: _____ Date: _____

A copy of the passport or Identification card must be sent with the declaration form.