

## Open Water Swimming Event

| Pre-Event Planning Checklist   |  |                |  |
|--|--|----------------|--|
| Event  |  |                |  |
| Local Host(s) & Personnel  |  |                |  |
| Scheduled Venue  |  |                |  |
| Scheduled Date   |  | Scheduled Time |  |
| Contingency plans (in case of adverse conditions, delays, etc)                                   |  |                |  |
| Local Safety Authority   |  |                |  |
| Proposed Course Location and Layout  |  |                |  |
| Proposed Safety Craft Plan (including first responders, transport, wildlife and traffic control) |  |                |  |
| Proposed Lifeguard Plan  |  |                |  |
| Proposed Officials Craft Plan  |  |                |  |
| Proposed Feeding Station(s) (Location(s), size, access)  |  |                |  |
| Emergency Plan (from incident to medical care)   |  |                |  |
| Local Water Quality Agency   |  |                |  |

Please attach satellite map showing proposed course (with dimensions), buoys, safety craft, feeding station(s), expected currents, potential hazards, on-shore landmarks, and emergency egress.

| <b>Race Day Conditions</b>                       |   |                   |             |
|--|---|-------------------|-------------|
| Technical Meeting<br>(Date/Time/Place)           | To include start, finish, turns, safety craft, withdrawal procedures, anticipated conditions                                    |                   |             |
| Pre-Race Briefing<br>(Date/Time/Place)           | To include course review, tides, currents, marine life, safety craft, withdrawal procedures, jewelry/nail inspection, roll-call |                   |             |
| Safety Craft<br>(Number and locations)           |   |                   |             |
| Lifeguards<br>(Number and locations)             |   |                   |             |
| Anticipated weather conditions through finish    |   |                   |             |
| List any changes from original race organization |   |                   |             |
| Air Temperature                                  |   | Water Temperature |             |
| Water Quality Test<br>(Date/Time/Results)        |   |                   |             |
| <b>Event Personnel</b>                           |   |                   |             |
| Position   | Name  | Phone             | Radio (Y/N) |
| Chair- Management committee                      |   |                   |             |
| Chief Referee                                    |   |                   |             |
| Safety Officer                                   |   |                   |             |
| Clerk of Course                                  |   |                   |             |
| Recorder   |   |                   |             |
| Medical Officer                                  |   |                   |             |
| USA Swimming Staff                               |   |                   |             |
| On-Site Emergency                                |   |                   |             |
| On-Site Safety Authority                         |   |                   |             |
| Doping Control Officer                           |   |                   |             |

## Athlete Questions for Open Water Race Organizers

Who is the Local Host and who will be the key officials?

Please list dates, times, and locations for the race, the technical meeting, and pre-race briefing

What law enforcement agency has control over the venue?

What medical personnel will be on-site at the venue?

What is the lifeguard/first responder plan?

Will water quality tests be conducted within 24 hours prior to the race, and will those results be distributed to the participants?

Can I get a copy of the written emergency plan, from incident to medical care?

Can I get a satellite image of the venue showing the proposed course (with dimensions), buoys, safety craft, feeding station(s), expected currents, potential hazards, on-shore landmarks, and emergency egress?

Please detail the start, finish, turns, safety craft, withdrawal procedures, and anticipated conditions including air/water temperatures, tides, currents, and potential hazardous marine life.

Please provide a contact list for the following people; Race Committee Chair, Chief Referee, Safety Officer, Clerk of the Course, Recorder, and Medical Officer.

Please provide a contact list and location for Local Emergency, Local Hospital, and Local Pharmacy.