

Certificate of Medical Disability

Please ensure you use the current year's form

Rule SW15.1M - Medical Disability (MD) states:

A swimmer with a non-manifest disability shall provide a medical certificate stating the swimming action (s) that may/will be affected. The certificate must be signed by an eligible healthcare practitioner, that is a medical doctor, physiotherapist, chiropractor, or osteopath.

Note: Non-manifest is not obvious to the eye, e.g. having only one leg is obvious or manifest.

The disability may be permanent or temporary and must prevent the swimmer from doing one of the stipulated actions in butterfly and/or breaststroke according to the Rules of Masters Swimming Australia (see attached form for details).

Unless the letter “P” for Permanent appears against all of the applicable categories, a new form must be completed for renewal each year at the time of re-registration. If the MD is permanent, then the form only needs to be submitted to the National Office once.

A temporary MD which has not been overcome must be renewed each year when the swimmer re-registers.

The Medical Disability form must be signed by the eligible healthcare practitioner for the Medical Disability to be registered. Each of the stroke action boxes must be marked with a ✓, ✓ P or ✗ as applicable before the form is signed.

Once the form has been completed the following steps are required:

1. The original form must be signed by any one of the club's executive members (President, Vice-President, Secretary, or Treasurer).
2. Three copies of the signed form need to be made:
 - one copy for the member's own records;
 - one copy for the club's records;
 - one copy for the Branch records.
3. The club must then forward the **original form** to the National Office at:
Masters Swimming Australia
Sports House, Level 2, 375 Albert Road, Albert Park VIC 3206.

If the disability occurs during the year (after re-registration), the certificate must be registered with the National office as soon as possible. If a swimmer is contemplating entering any Masters Swimming Australia Swim Meets, the form must be registered at the National office by the close of entries.

Medical disability certificates are not accepted for National Championships.

If a Medical Disability has occurred after the close of entries for a Swim Meet the swimmer may present the certificate to the Meet Director of the Swim Meet. It is then up to the discretion of the Meet Referee if the form is accepted or not for that meet. **The form will subsequently have to be processed as per steps 1, 2, and 3 above.**

Please note this rule applies to Masters Swimming Australia events only. No other organisation allows for non-manifest disabilities.

For any further enquiries, please contact your Branch office/Secretary.

Year of currency: 20__

Masters Swimming Australia Inc
Sports House, level 2, 375 Albert Road

**Masters Swimming Australia
Certificate of Medical Disability
(MD Certificate)**



To be completed by the Club filling out the form

- Copy to Club file
- Copy sent to Branch
- Original sent to National

Dear healthcare practitioner,
Thank you for completing this form for:
(Given Name)

(Family Name)

Address:

(Membership Registration Number)

(Club Name and Code)

Your patient may have a permanent or temporary disability, which may prevent the performance of the correct swimming stroke according to the rules of Masters Swimming Australia in butterfly and/or breaststroke.

Indicate with '✓' next to each of the following statements that apply to your patient. **Please add the letter "P" after the '✓' if you consider the disability to be permanent. i.e. '✓P', or '✓P'**
Indicate with 'x' next to those statements not applying to your patient i.e. 'x'. Please mark every box with either '✓', '✓P' or 'x'.

Butterfly		
Cat.	Description of Disability Category	'✓', '✓ P' or 'x'.
BU1	Both arms cannot be brought forward together and/or cannot be brought backwards simultaneously (SW8.2)	
BU2	Feet movements cannot be made simultaneously (SW8.3M)	
BU3	Both hands cannot touch simultaneously at each turn and at the finish (SW8.4)	

Breaststroke		
Cat.	Description of Disability Category	'✓', '✓ P' or 'x'.
BR1	Arm movements cannot be made either simultaneously or in the same horizontal plane (SW7.2)	
BR2	Hands cannot be pushed forwards and/or brought backwards together (SW7.3)	
BR3	Leg movements cannot be made simultaneously or in the same horizontal plane (SW7.4)	
BR4	Both hands cannot touch simultaneously at each turn and at the finish (SW7.6)	
BR5	Feet cannot be turned outward (SW7.5)	

Healthcare practitioner's Name:		Address:	
Telephone:	Signature:	Please cross out those not applicable: doctor / physiotherapist / chiropractor / osteopath	Date:

Requirements:

- The Certificate of Medical Disability **MUST BE COMPLETED FULLY** by an eligible healthcare practitioner (see Rule SW 15M) and **SIGNED by a Club Executive Official**.
- The **original** Certificate of Medical Disability must be sent to the **Masters Swimming Australia, Sports House, Level 2, 375 Albert Road, Albert Park VIC 3206**
- The Medical Disability Certificate must be registered with the National Office by the close of entries.
A temporary Medical Disability Certificate may be presented to the Referee prior to start of the swim competition.
- This form must be completed for renewal each year at the time of re-registration unless the letter "P" for PERMANENT appears in all the relevant boxes above.

Club Executive Official's name:	Position:	Signature:	Date:
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Year of currency: 20__

Masters Swimming Australia Inc

Sports House, level 2, 375 Albert Road
Albert Park VIC 3206