



**2014 Event Sanction Checklist – organizer completes the following**

**PRE-EVENT CHECKLIST:**

- ALL FIELDS filled
- SANCTION FEE paid
- SANCTION AGREEMENT signed
- EVENTS LISTING included showing all events in the series and levels
- TECHNICAL LICENSE purchased by Organizer
- CERTIFICATE OF INSURANCE filled out & purchased, if Third Party requires for proof of coverage
- EVENT KIT / EQUIPMENT requested, if required
- SOCIAL NETWORK LINKS provided to Cycling BC (Website/Facebook/Twitter/Social Media)
- TECHNICAL GUIDE & EMERGENCY ACTION PLAN completed

**POST-EVENT CHECKLIST:**

- RESULTS submitted
- POST-EVENT FORMS submitted (includes one event forms & participant number tallies)
- INCIDENT REPORTS submitted (if any incidents / accidents)

**EVENT SANCTION AGREEMENT:**

I understand that these series of events will **NOT** be posted to the website until this **EVENT SANCTION AGREEMENT** has been received at the Cycling BC office and the **EVENT SANCTION FEES** paid. Sanction fees are not refundable. As a condition of applying for this race sanction, the organizer agrees to abide by all the applicable Union Cycliste Internationale and Cycling Canada Cyclisme regulations, and all Cycling British Columbia policies.

x \_\_\_\_\_  
 Name of Organizer Date

To access the Cycling BC Sanction Application Process the Organization applying for the sanction **MUST BE AFFILIATED** with Cycling BC as a **Provincial Club, Trade Team or Supporting Business**.

<b>NAME OF ORGANIZER</b>	
Organizer's Technical License #	
Organizer's Home Phone #	
Organizer's Cell Phone #	
Organizer's Email Address	
<b>NAME OF AFFILIATED ORGANIZATION</b>	
Organization's Billing Address	
Organization's City, Province, Postal	
<b>NAME OF EVENT</b>	2014
Location of Event	
Date of Event (Preference#1)	
Date of Event (Preference#2)	
Date of Event (Preference#3)	
<b>CHEQUE TO CYCLING BC ENCLOSED</b>	
<b>or CREDIT CARD # for Processing Fees</b>	- - - (16 digits visa/mc)
Expiry Date	MM/YY
Name on Card	
Signature of Card Holder	x
<b>Provincial \$100 / Regional \$50 / Grassroots \$25</b>	\$

## SANCTION LEVEL & CALENDAR FEES: check only one

- PROVINCIAL LEVEL RACE** - \$100, minimum sanction level for BC Cup Status
  - REGIONAL LEVEL RACE** - \$50 each race, to a maximum of \$250 for a series
  - GRASSROOTS LEVEL RACE** - \$25 each race, to a maximum of \$150 for a series
- All Race Series Organizers MUST attach an EVENTS LISTING

## DISCIPLINES OFFERED AT THIS EVENT: check all that apply

### ROAD EVENTS including:

- Road Race    Time Trial    Criterium    Hill Climb    Fondo    Ride

### MOUNTAIN EVENTS including:

- XCO    XCM    Enduro    Downhill    SuperD    4-Cross

## CATEGORIES OFFERED AT THIS EVENT: check all that apply

- Cat 1/2    Cat 3    Cat 4    Paracycling    Citizen    Master  
 Junior    U19    U17    U15    U13    Senior  
 Pro-Elite    Expert    Sport    Novice    SuperD    4-Cross

And if the event hosts Para-cycling categories, which categories will it offer:

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## 2014 Sanction Agreement:

**Please note that Cycling British Columbia is here in after referred to as "Cycling BC", Cycling Canada Cyclisme as "CCC" and Union Cycliste Internationale as "UCI".**

By applying to sanction one or more races, the undersigned Organizer agrees:

1. To abide by the terms of the event sanctioning application, and that this process will be used by Cycling BC to manage the process of creating the event calendars.
2. That the event(s) proposed by the Organizer will be organized in a responsible manner which reasonably limits the risk to participants and which promotes the good image of Cycling BC, the Race Organizer, and the sport of cycling in general.
3. That the Organizer will receive written permission from any applicable land owners and government departments prior to hosting any event(s).
4. That the Organizer alone is completely responsible for the organization of the event(s), and for all costs, debts, expenses, losses, damages or injuries to property or persons that should arise as a result of the organization or execution of the event or by participating in it in any capacity. In doing so, the Organizer shall work to minimize the possibility of such losses. Cycling British Columbia will in turn provide liability insurance coverage for the Organizer.
5. That the Organizer will arrange to publish an Emergency Response Plan and will arrange to have available a reasonable number of medics or other trained and certified first aid staff for the duration of the event, including any official training periods.
6. That the Organizer must display the text "Sanctioned by Cycling BC" and the Cycling BC logo on all web sites and promotional materials used to promote the event.
7. That failure by the Organizer to read and ask Cycling BC questions concerning its regulations, policies, this sanctioning process or the regulations of the CCC and UCI does not waive the Organizer's responsibility to comply with said policies, processes, and regulations.
8. To send a technical guide for all regional and provincial level races to Cycling BC at least 30 days prior to the event, and change any provisions of the technical guide not accepted by Cycling BC.

Initials: \_\_\_\_\_



9. That the Organizer will address any complaint concerning Cycling BC, its staff, volunteers or services directly to Cycling BC, and not in the forum of public opinion, but particularly with social media tools, internet forums or bulletin board systems. The same shall apply to the Organizer's dealings with the CCC and the UCI (if any). If any such complaint is not resolved to the Organizer's satisfaction, then the Organizer has the right to lodge an appeal using Cycling BC's appeal's policy.
10. That the Organizer will appoint and pay all Commissaires and Timing Technicians and provide suitable working conditions (or the Commissaire policies of the CCC or UCI, as appropriate for the event in question).
11. That the Organizer will always communicate about the sport of cycling in a responsible and positive manner.
12. That over and above the remedies provided by the UCI Regulations, Cycling BC has, at any time, the right to cancel the sanction awarded to any organizer for any event(s) should this agreement or the code of conduct for race organizers be breached.
13. That the Organizer will keep the Cycling BC office informed of any issues that could affect its ability to organize its event(s).
14. That if it becomes necessary to cancel the event, the Organizer will notify Cycling BC in writing, giving as much notice as possible before doing so.
15. To recognize and defer to the authority of the Commissaires' Panel to make decisions regarding the sporting conduct of the race, including technical matters with the course or venue that could possibly influence or affect the race.
16. To forward the results of the race(s) to Cycling BC within 48 hours of the last day of the race, in the format that it specifies. Otherwise a late charge of \$10 per day will be applied.
17. To pay all other contractors according to the terms of any agreement with them or according to any relevant Cycling BC policy.
18. To pay any invoices received from Cycling BC no later than the due date specified on the invoice, unless negotiated otherwise.

**Name:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**2014 Technical Guide** – including Emergency Action Plan (EAP), Race Safety Checklist (RSC) & Accident Injury Report (AIR)

**Instructions:**

DOCUMENTS may be returned via FAX to 604-737-3141, or by email to [info@cyclingbc.net](mailto:info@cyclingbc.net) within 30 days of the event, the Technical Guide and Emergency Action Plan must be submitted to Cycling BC.

**Special Notes:**

For Cross-Country & Downhill Mountain Bike, the following criteria **MUST** be met:

1. **MINIMUM RIDER AGE** is 10 for cross-country and 14 for downhill (as of December 31<sup>st</sup> of the current year) unless otherwise approved.
2. All participants **MUST HOLD A VALID 2014 RACE LICENSE** (UCI or CITIZEN), or be a 2014 ASSOCIATE CLUB MEMBER of the club hosting the event, or fill out a **2014 ONE EVENT DAY LICENSE FORM**.

**Section 1 – Technical Guide for Races & Events:**

<b>RACE EVENT DETAILS</b>	Below information will be posted to Cycling BC Race Calendar
Race Name	
Race Dates	
Location	
Discipline	
Website / Email	
<b>RACE CONTACT INFO</b>	
Organizer’s Name	
Club or Team Name	
2013 Technical License #	
Address, City, Pr, Postal	
Telephone / Cell #	
Organizer’s Email	
Registration Person	
Registrar’s Email	
<b>APPROVAL FROM 1 of CLUB’s EXECUTIVE?</b>	
Yes / No	
<b>INSURANCE PERMITS RECEIVED FOR LAND USE?</b>	
Yes / No	
If No, Please Explain ...	

If **PROOF OF INSURANCE** is required, then please go online to our *2014 Insurance Certificates* Page: <http://cyclingbc.cloverpad.org/Default.aspx?pageId=618037&eventId=262319&EventViewMode=2&CalendarViewType=1&SelectedDate=1/18/2011>

Please submit an application for a CLUB or COMMERCIAL Certificate of Insurance (COI); Please note that

1. **CLUB CERTIFICATES** are for clubs wishing to host events for CLUB MEMBERS ONLY.
2. **COMMERCIAL CERTIFICATES** are for clubs wishing to host events accommodating non-licensed riders, and/or out of province/country riders, and/or NON-CLUB MEMBERS.

**Section 2 – Emergency Action Plan (EAP):**

**REQUIREMENTS:**

At a basic minimum, a single person must be identified as the in-charge First Aid Attendant and be available at all times during the event. This person must be able to receive contact from course marshals (or via the head organizer who is in contact with all the course marshals) and be stationed at an identifiable First Aid post. The in-charge First Aid Attendant must have at the minimum Occupational First Aid (OFA 1) or Standard First Aid (SFA 1). The in-charge Attendant must have a complete first aid kit on site and ice bags are recommended.

**NOTE:** The higher level is strongly recommended especially for those events that are greater than 10km away from an Ambulance Dispatch.

<b>EMERGENCY ACTION PLAN DETAILS</b>	
<b>Name of First Aid Attendant (in charge)</b>	
<b>Method of Contact during Event</b>	
<b>Location of Primary First Aid Station</b>	
<b>Location of Emergency Services Phone #</b>	
<b>Phone # of Nearest Hospital</b>	
<b>Address of Nearest Hospital</b>	
<b>Directions to Nearest Hospital</b>	

**PLEASE CONFIRM THAT THE FOLLOWING EMERGENCY ACTION PLAN STEPS HAVE BEEN COMPLETED:** Please check one box only for each statement

- Yes**       **No**      All Marshals and First Aid Attendants will be given a race course map with the First Aid and Marshal positions identified (M1/M2)
- Yes**       **No**      All Marshals and First Aid Attendants will be given a listin gof cell phone numbers including the First Aid Attendant and Race Organizer
- Yes**       **No**      The map with the Emergency Action Plan will be clearly posted at the event
- Yes**       **No**      The Local Ambulance will be notified and given directions to the event site

**Section 3 – Accident Injury Report:**

**Accident & Claim Reporting Process:**

All accidents and AD&D claims must be reported to the Cycling BC office within 5 days of the incident. Also, a phone call must be made to the broker of record, please contact the Cycling BC office for the number.

Upon such notice, the Cycling BC office will provide the injured party with a **Accident Report Form**.

Please note that claims are for expenses in excess of the rider’s current medical program or current employee benefits program that are covered by the current AD&D Policy.



**Accident Injury Report (continued):**

Name of Injured Rider / Person: \_\_\_\_\_

Event / Activity Name: \_\_\_\_\_

Date & Time of Accident: \_\_\_\_\_

Contact Number for Injured Rider/ Person: \_\_\_\_\_

Nature of Injury: \_\_\_\_\_

Description of Injury: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Brief Description of Event that Led to Injury: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Witness Name and Contact Number: \_\_\_\_\_

Race Organizer's Name and Number: \_\_\_\_\_

Was First Aid Administered at the Scene:            Yes            No

Was an Ambulance Called to the Scene:            Yes            No

What Hospital was the Injured Person Taken To: \_\_\_\_\_

Any Other Relevant Information Please Provide Below: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name Here: \_\_\_\_\_

**Note 1:** This form must be completed as much as possible, and returned to Cycling BC within 7 days of the injury

**Note 2:** If available, attach any report from the first responder

**Note 3:** This document and its contents are privileged; they were prepared in anticipation of litigation



**2014 POST EVENT FORM** – this report is due within 5 days of your event and should include the following items as listed below:

- The completed POST EVENT information – detailing event demographics
- The completed POST EVENT ONE EVENT forms – detailing non- member insurance sales
- The completed PAYMENT of the one-event fees
- The completed ELECTRONIC RACE RESULTS emailed to [info@cyclingsbc.net](mailto:info@cyclingsbc.net)
- The completed INCIDENT REPORT FORMS, if any

DOCUMENTS may be returned via **FAX to 604-737-3141**, or by email to [info@cyclingsbc.net](mailto:info@cyclingsbc.net)

<b>EVENT NAME</b>			
Event Date			
Event Organizer			
Event Organizer's Phone #			
Event Organizer's Email			
<b>EVENT DEMOGRAPHICS</b>			
TOTAL NUMBER OF RIDERS			
Number of Males			
Number of Females			
<b>SANCTION FINANCIALS</b>			
Sanction Fee Payment of \$			
Sales Receipt # or Invoice #			
Date of Payment			
<b>ONE EVENT FINANCIALS</b>			
# Non Members who Participated			
# That Paid for \$30 Excess Medical Fee		x \$30	\$ _____
# That Paid for \$10 Adult One Event Fee		x \$10	\$ _____
# That Paid for \$5 Youth U17 One Event Fee		x \$ 5	\$ _____
<b>TOTAL ONE EVENT \$ COLLECTED</b>	\$ _____		
Above Fees paid by CHEQUE?	Yes / No		
<b>CHEQUE TO CYCLING BC ENCLOSED</b>	# _____		
<b>or CREDIT CARD # for Processing Fees</b>	-	-	- (16 digit visa/mc)
Expiry Date	MM/YY		
Name on Card	_____		
Signature of Card Holder	X _____		



**2014 COMMISSAIRE EXPENSE CLAIM FORM**

<b>COMMISSAIRE DETAILS</b>	
Commissaire Name	
Commissaire Address	
Commissaire City, PR, Postal	
Commissaire Phone	
Commissaire Email	
<b>EVENT DETAILS</b>	
Date of Event	
Name of Event	
Discipline – Rd/Tk/CX/XC/DH/4X/BMX	
Dates Worked (days)	
<b>HEAD COMMISSAIRE STANDARD RATES</b>	
5010 Commissaire Fees \$135/day x # days	\$135 x _____ days = \$ _____
<b>ASSISTANT COMMISSAIRE STD RATES</b>	
5010 Commissaire Fees \$110/day x # days	\$110 x _____ days = \$ _____
<b>TIMING TECHNICIAN STANDARD RATES</b>	
5010 Commissaire Fees \$110/day x # days	\$110 x _____ days = \$ _____
<b>TRAVEL EXPENSES 5050 Travel: Officials</b>	
MILEAGE: \$15 if <100km; if >100km then 37c/km	\$0.37/km x _____ kms = \$ _____ <b>OR \$15</b>
BC FERRIES: round trip expenses	\$ _____
Parking or Taxi	\$ _____
Other Travel	\$ _____
<b>GRAND TOTAL</b>	<b>\$ _____</b>

<b>AUTHORIZATION PROCESS</b>	<b>OFFICE USE ONLY</b>
Posted By	
Entered by Cycling BC Accounting on	
Authorized by Exec. Director / Board Member	
Date of Authorization	