



BC Athletics
Mini-Meet Sanction Application
and Event Information

#120 – 3820 Cessna Dr.
Richmond BC V7B 0A2
ph: (604) 333-3550
fax: (604) 333-3551
e-mail: bcathletics@bcathletics.org
website: www.bcathletics.org

1. Completed Sanction Application Form and fees to be submitted **3 months prior to event date**. A \$28.00 surcharge will be applied if the sanctioning form and fees are received less than 30 days from the event..
2. Sanction Applications will not be processed until both the form and fees are received. BCA affiliated club members - \$8.96. Non BCA clubs/organizations - \$17.92.
3. Fees include HST (#127293264) - payable to BC Athletics
4. Complete and return with payment to BC Athletics
5. The Alternative Liability Insurance Waiver fee is \$56.00
6. Post Event Submission Forms are required for all events and are due 30 days after the completion of the event.
7. **Include entry form and brochures**

MINI-MEET INFORMATION

Event Name: _____

Date: _____ Starting Time: _____

Series Name: _____

Note: If there is more than one meet in the series attach a list showing the dates for each meet and the events being offered at each mini-meet. Each meet will be charged a separate sanction fee.

Info email: _____ Series Website: _____

ADMINISTRATION

Club/Non-profit society/recognized approved organization requesting sanction: _____

Current BC Athletics affiliated club: Yes No

Registered Non-Profit Society Registered Charity Corporation Partnership Sole Proprietorship Other: _____

Meet Director: _____

Address: _____
P.O. Box & Street Address City Prov. Postal Code

Res. Ph: _____ Bus. Ph: _____ Fax: _____

e-mail: _____

Meet Manager: _____

Address: _____
P.O. Box & Street Address City Prov. Postal Code

Res. Ph: _____ Bus. Ph: _____ Fax: _____

e-mail: _____

Entry Chairperson: _____

Address: _____
P.O. Box & Street Address City Prov. Postal Code

Res. Ph: _____ Bus. Ph: _____ Fax: _____

e-mail: _____

Officials Chairperson: _____

Address: _____
P.O. Box & Street Address City Prov. Postal Code

Res. Ph: _____ Bus. Ph: _____ Fax: _____

e-mail: _____

POST EVENT SUBMISSION FORMS

All BC Athletics sanctioned events are required to submit a Post Event Submission Form within 30 days of the completion of their event. An online version of the form is available on the BC Athletics website under the "Event Directors" link at <http://www.bcatletics.org/main/resources.htm#resources> The form can be filled out on-line and printed to submit with payment.

MEET DIRECTOR

I, _____ on behalf of the Organizing Committee and _____
Race Director (please print) *BC Athletics Club or Event Organization*
declare that all the requirements for a sanctioned event including Risk Assessment and Reduction have been met and that all rules (IAAF, Athletics Canada, BC Athletics) will be adhered to.

Signature: _____ Date: _____

PAYMENT INFORMATION *(Fees include GST)*

\$8.96 – Sanction fee BCA Club/Org. \$17.92 – Sanction fee Non-BCA Club/Org.
 \$28.00 – Surcharge (less than 30 days notice) in addition to Sanction Fee \$56.00 – Alternative Liability Insurance fee
 VISA /MC/Amex Cheque/MO Cash Card #: _____ Exp. Date: _____
Cardholder: _____ Signature: _____

BC ATHLETICS USE

The above meet on _____ HAS or HAS NOT Been approved..

Signature: _____ Date: _____

Event Medical Planning Guidelines

It is the responsibility of an event organizer to ensure a safely run event. Safety includes a safe environment for participants, spectators, officials and volunteers, and in the event of an incident requiring medical attention for there to be a plan to respond in a timely manner with qualified medical personnel.

All event organizers must undertake a risk assessment of their event; they must apply risk management to minimize identifiable risk; and they must have qualified medical personnel present to respond if the need arises.

The necessary scale of such medical support will be determined during the risk assessment and should include consideration of factors including:

- The number of people expected to attend (including participants, spectators, volunteers, etc.).
- The number of people competing concurrently.
- The age of participants.
- The experience and fitness level of participants.
- The duration of the event.
- Anticipated weather conditions.
- Risks inherent in the activity.
- The size of the field of play.
- Accessibility to the field of play.
- Communications capabilities.

Communications are a key component of the medical plan. Event volunteers must be instructed in how and when to call for assistance; and medical personnel must be able to respond in a timely manner. For large or geographically dispersed events this may require employing mobile medical units or dedicated medical facilities.

Medical personnel must be dedicated exclusively to medical support so as not to introduce additional risk.

The number and required qualifications of the medical team will be determined by the risk assessment. A recommended minimum for any event is 2 dedicated medical personnel holding current certification in Standard First Aid. Standard First Aid Certification is a recognized qualification based on a Health Canada review and approval of a training organization's curriculum / syllabus, standards and other factors. Several national organizations including the Red Cross, the Lifesaving Society and St. John Ambulance award such certificates, as well as local organizations. Such qualification should provide knowledge to handle the following:

- Emergency Scene Management
- Shock, Unconsciousness & Fainting
- Choking
- Cardiovascular Emergencies
- One Rescuer CPR
- Severe Bleeding
- Medical Conditions
- Bone and Joint Injuries
- Eye Injuries
- Dental Emergencies
- Burns
- Poisons, Bites, and Stings
- Heat and Cold Emergencies
- Rescue Carries

Note: Emergency First Aid certification does not provide training to handle many of the above situations. It primarily trains for life-threatening emergencies. Individuals with Emergency First Aid Certification may not be qualified to handle the types of injuries that most commonly occur at athletic events.