



GYMNASTICS NOVA SCOTIA

5516 Spring Garden Road, 4th floor, Halifax, NS B3J 1G6

Tel: (902)425-5450, ext. 338, fax: (902)425-5606

Web page: www.gymns.ca

e-mail: gns@sportnovascotia.ca

Age : Under 18

To: Parents of Potential 2016 Atlantic Team Members

From: Angela Gallant, Executive Director

Re: Atlantic Championships – St. John's, NF

Date: March 2, 2016

Gymnastics Newfoundland and Labrador will be hosting the 2016 Atlantic Canadian Championships on April 22nd and 23rd at the Sportsplex in St. John's Newfoundland. Teams will be announced following competition at the NS Provincial Championships, based on the Women's and Men's Program regulations.

In order for your child to be eligible for team selection, it is NECESSARY that you have the following information to your club by *date to be filled in by club*. Clubs must have this information to the Gymnastics Nova Scotia office by March 24th, 2016. If your child does not make this team, your cheque will be returned to you at the Provincial Championships.

Forms and Payment Required

- A cheque for **\$709.00** or **\$766.50** (if checking luggage) made payable to Gymnastics Nova Scotia (this can be postdated to April 4th)
- **GNS Consent Form** (1 form attached - please ensure appropriate consent form for age)
- **Host Consent/Waiver/Media Release Form** (1 form attached - ensure appropriate age)
- **GNS Medical form** (1 form attached)
- **Fair Play Form** (1 form attached)

The above forms are also available on the GNS webpage under Events then Atlantics. **Completed forms and payment are to be passed on to a designated person in your club by the date indicated above. If GNS does not receive these forms and payment at least one week prior to the Provincial Championships, the club will be fined and your child may not be eligible for team selection.** Clubs are responsible to collect all the information by the club deadline date and then pass it on to GNS as **one complete package** by the **GNS deadline date of March 24, 2016**. If forms are received after the deadline the club will receive a fine from GNS.

Team Travel Event

This is a team travel event so athletes are expected to be with the Team NS delegation at all times during the trip. If an athlete needs to leave the delegation for an approved reason, the appropriate paperwork needs to be completed by the following dates:

- special travel requests for **extenuating circumstances only** – must be submitted to GNS by March 31st
- to leave delegation for small amount of time during trip for **an approved reason only** – paperwork must be submitted to GNS by April 15th.

Please contact the GNS office via phone (902)425-5450 or email: gns@sportnovascotia.ca for the required paperwork.

COST BREAKDOWN

Transportation – \$446 per person with carry-on baggage only or \$503.50 with one checked bag

Please note that carry-on baggage is limited to two pieces as follows:

- 1 standard article not exceeding 53 x 38 x 23 cm (21 x 15 x 9 in) and weighing less than 9 kg (20 lbs)
- 1 personal article not exceeding 33 x 41 x 15 cm (13 x 16 x 6 in) and weighing less than 9 kg (20 lbs)

Flight (\$391 per person or \$448.50 per person if checking luggage. The Gymnastics Nova Scotia group will be flying on WestJet Airlines and Porter Airlines to St. John's on Thursday, April 21st on the following flights:

WestJet WS 3422 –	Depart Halifax, NS at 7:05am	Arrive in St. John's at 9:22am
Porter PD 251 -	Depart Halifax, NS at 7:30am	Arrive in St. John's at 9:40am

The return flights on Sunday, April 24th are as follows:

Porter PD 270 –	Depart St. John's at 1:30pm	Arrive in Halifax at 3:10pm
WestJet WS 3421 –	Depart St. John's at 6:35pm	Arrive in Halifax at 8:15pm

Actual flight groups and airport meeting times will be communicated as the event gets closer.

Ground Transportation (\$55.00 per person). School buses have been booked by GNS through Parsons and Son's in St. John's. Parsons and Son's will do both Team Nova Scotia pickups at the St. John's airport on Thursday, a team outing and team dinner on Thursday, transport team members to and from the competition venue all day Friday and Saturday and return both groups to the airport on Sunday. Two minivans have also been booked to transport smaller groups when needed.

Accommodations - \$133.00 per athlete

The group will be staying at the Holiday Inn (Portugal Cove Road) in St. John's. Rooms have been booked for athletes, coaches and judges for Thursday, Friday and Saturday nights. Coaches and GNS program committees will do the rooming assignments. **As per GNS Policy, all team members are required to stay with the team in the team hotel.** Athletes will be the responsibility of coaches, managers and chaperones.

Hotel information for family and friends:

Ramada St. John's
102 Kenmount Road
St. John's, NL
(709) 722-9330
Rate: \$140.00

Fairfield Inn & Suites
199 Kenmount Road
St. John's, NL
1-855-823-6346
Rate: \$154.00 (Includes hot breakfast)

Registration - \$80.00

Includes a Saturday evening banquet for athletes at Axtion Indoor Adventure Park.

Cost Share Amount – \$50.00

This amount helps fund the expenses of the team coaches, judges and support staff

Meals -

Meal cost is the responsibility of the individual. Please budget for the following meals:

- Thursday – lunch, supper and snacks for the flight
- Friday – breakfast, lunch, supper and snacks
- Saturday – breakfast, lunch and snacks
- Sunday – breakfast, lunch, supper (for those on later flight), and snacks for the flight home

Uniforms -

All athletes and coaches are required to wear the official GNS Track jacket with black pants. For competition, girls are to have the new provincial leotard and boys are to have the provincial singlet with the blue pants. Club coaches are responsible for ensuring that all **gymnasts from their club are outfitted properly**. Please contact Uniforms Director, Wendy Cruickshank (wendy.cruickshank@hotmail.com) or the GNS office (gns@sportnovascotia.ca) if there are any problems.

Payment for track jackets, girl's leotards, boy's singlets, pants and shorts will be made to your club and one cheque will be sent to GNS from the club. The actual prices for the team bodysuits, singlets and pants will be relayed to your club once they all arrive.

Website:

If there is a competition website, GNS will set up a link to this from the Altantics section of the GNS website. The tentative competition schedule is also posted on the GNS website but remember that this is tentative.

Competition Venue -

Sportsplex, 90 Crosbie Road, St. John's, NF

Further information will be communicated to team members as it becomes available.



Gymnastics Nova Scotia

Participant's Informed Consent Form (under 18)

Event: Atlantic Canadian Gymnastics Championships

Event Location: St. John's, NF

Event Date: April 21-24, 2016

PLEASE READ CAREFULLY

Risk: I, _____ give my consent for my child _____
(Parent's Name) (Child's Name)

to participate in the above named event. I also understand that travelling to and from and participating in the event may result in personal injury (including but not limited to: injury to bones, joints, ligaments, muscles, tendons, internal organs, and other aspects of the skeletal system and potential impairment to other aspects of the body, and in rare occurrences, death, complete or partial paralysis, or brain damage) and property damage or loss. I fully understand these risks and hereby agree to allow my son / daughter to participate voluntarily.

Rules: I understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to inform my son / daughter of the rules and regulations set down by the event Organizing Committee.

Media Release: I hereby grant to Gymnastics Nova Scotia the right to use, without payment of any fee or charge, any written information (excluding information contained on the Medical Form), photograph, video tape or other visual media of my son / daughter taken during the event for the purpose of media and provincial association promotion of the event.

Liability: In consideration of your acceptance of my entry in the event, I, intending to be legally bound, agree to RELEASE, SAVE HARMLESS AND INDEMNIFY Gymnastics Nova Scotia, the Organizers and/or its agents from and against all claims, actions, costs and expenses and demands in respect to death, injury, loss or damage to my son / daughter or property where so ever and howsoever caused, arising out of, or in connection with my association with or entry in the above athletic meet or which may arise out of my traveling to or participating in and returning from the said athletic meet. I further agree to HOLD HARMLESS AND INDEMNIFY Gymnastics Nova Scotia, the Association, the Organizers and/or its agents from any and all actions, claims, demands, losses, judgments or costs of any nature to any third party resulting from my sons/ daughters association with or entry in the said athletic meet and I agree not to make any claims or take any proceedings against any person, society, corporation or other legal entity who might claim contribution or indemnity from Gymnastics Nova Scotia, the Organizers and/or its agents in respect of matters which are subject of this Release. I agree that this Release shall bind my heirs, executors, administrators and assigns.

I as the parent/guardian of the participant named herein, hereby declare that I have read, understood and agree to the contents of this Informed Consent in its entirety.

I as the parent/guardian of the participant named herein, agree to assume full responsibility to instruct my child of the risks involved and to inform him/her of the importance of abiding by the rules and regulations.

Parent/Guardian Signature: _____ Date: _____

Witness Name: _____

Witness Signature: _____ Date: _____



**ATLANTIC GYMNASTICS CHAMPIONSHIPS
PARTICIPANT'S INFORMED CONSENT FORM
(Under 18 years old)**

PLEASE READ CAREFULLY

Risk:

I, _____ give my consent for my child _____
(Parent's Name) (Child's Name)

to participate in the 2016 Atlantic Gymnastics Championships. in St. John's, NL. I understand and acknowledge that traveling to and from and participation in the 2016 Atlantic Gymnastics Championships may result in personal injury (including but not limited to: injury to internal organs, bones, joints, ligaments, muscles, tendons and other aspects of the skeletal system and potential impairment to other aspects of the body, and in rare occurrences, death, complete or partial paralysis, or brain damage) and property damage or loss. I fully understand these risks and give my son/daughter permission to participate in the 2016 Atlantic Gymnastics Championships.

Rules: I understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to inform my son/daughter of the importance of abiding by the rules and regulations set down by the 2016 Atlantic Gymnastics Championships Organizing Committee and their provinces code of conduct.

Media Release: I hereby grant Gymnastics Newfoundland & Labrador the right to use, without payment of any fee or charge, any written information (excluding information contained on the Medical Form), photograph, video tape or other visual media of my son/daughter taken during the 2016 Atlantic Gymnastics Championships or the purpose of media and provincial association promotion of the 2016 Atlantic Gymnastics Championships.

. I as the parent/guardian of the participant named herein, hereby declare that I have read, understood and agree to the contents of this Informed Consent in its entirety.

. I as the parent/guardian of the participant named herein, agree to assume full responsibility to instruct my child of the risks involved and to inform him/her of the importance of abiding by the rules and regulations.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ **Date:** _____

Witness Name: _____

Witness Signature: _____ **Date:** _____



Gymnastics Nova Scotia

Record Of Medical Information

Athlete Name: _____
Address: _____
City/Prov: _____
Postal Code: _____
Phone #: _____
Cell phone #: _____
Birthdate: D _____ M _____ Y _____

Emerg Contact: _____
Relationship: _____
Emergency Ph: _____

e-mail address: _____

Provincial Plan # & Expiry Date (MSI for NS): _____

Medical Information:

Please indicate any medical information, allergies or conditions that may be important in an emergency

In the event of medical treatment parents and or guardians will be contacted at the emergency number noted above.

RECORD OF MEDICAL CONSENT FOR MINORS

In the event of an emergency I, hereby give permission for my son / daughter to receive emergency medical / surgical care administered by qualified staff and / or Physicians.

Date: _____

PARENT / GUARDIAN

Name: _____

Signature: _____

Relationship: _____

WITNESS

Name: _____

Signature: _____

Relationship: _____



GNS Fair Play Contract

I, as an ambassador and representative for the province of Nova Scotia, shall abide by the spirit and guidelines of the Fair Play Codes for participants.

Participant Guidelines

Our Fair Play Code

Respect at all times for participants, coaches, officials, teammates, spectators, opponents, administrators and volunteers.

Sportsmanship prior to, during and following the activity; demonstrating modesty in victory and composure in defeat.

Knowledge of all rules, whether written or unwritten, and following the spirit of those rules.

Access for all to participate, regardless of age, gender, race or skill level.

Participation in a manner that demonstrates more than just the desire to win. Having fun, making friends, improving skills and performing your personal best must be just as important when participating.

Participant Name

Date

Participant Signature

Parent/Guardian Signature (if under 18)