

## **GYMNASTICS NOVA SCOTIA**

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**Age: 18 & over** 

## Memorandum

To: 2016 Eastern Canadian Artistic and T&T Championships -

**Potential Team Members** 

From: Angela Gallant, Executive Director

Re: 2016 Eastern Canadian Artistic and T&T Championships

**Date:** March 3, 2016

The 14<sup>th</sup> Eastern Canadian Gymnastics Championships are being hosted by Club de gymnastique Québec Performance and Gymnastique Québec and are being held at the Stade Telus in Quebec City from May 5-9, 2016. The competition schedule will be posted on the GNS website and forwarded to parents once it becomes available.

The Nova Scotia Provincial Artistic Teams will be announced following competition at the NS Provincial Championships, based on the Women's and Men's Program regulations. The Nova Scotia Provincial T&T Teams will be announced based on sanctioned competition results.

In order for you 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 24<sup>th</sup>, 2016 for both Artistic Gymnastics and Trampoline and Tumbling. If you do not make this team, your cheque will be returned to you at the Provincial Championships or through your club following Provincials.

#### **Forms and Payment Required**

- A cheque for \$\frac{\$453.00}{}\$ made payable to Gymnastics Nova Scotia (this can be postdated to April 11<sup>th</sup>)
- **GNS Consent Form** (1 form attached please ensure appropriate consent form for age)
- GNS Medical form (1 form attached)
- Host Consent/Waiver Form (1 form attached)
- Fair Play Form (1 form attached)





The above forms are also available on the GNS webpage under Events then Easterns Artistic or Easterns T&T. 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 <u>one complete package</u> 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 the delegation for a small amount of time during the trip for **an approved reason only** paperwork must be submitted to GNS by April 29th.

Please contact the GNS office via phone (902)425-5450 or email: <a href="mailto:gns@sportnovascotia.ca">gns@sportnovascotia.ca</a> for the required paperwork.

#### **COST BREAKDOWN**

#### **Transportation**

**\$170 per person** – includes travel to Quebec City and return transportation back to Halifax. The Gymnastics Nova Scotia group will travel via Ambassatours Bus lines and will depart the Metro Halifax area on the morning of Thursday, May 5<sup>th</sup>. Actual times and the pickup locations will be communicated as the event gets closer. The group will return on Monday, May 9<sup>th</sup> following the competition. Two rental vehicles are also booked in Quebec to transport small numbers if needed.

#### **Accommodations -**

\$153 per athlete – Nova Scotia participants will be staying at the Hotel Universel Quebec City on May 5, 6, 7, & 8th. This hotel is about an 8 minute walk to the competition venue. All judges will also be housed at the Hotel Universel Quebec City. As per GNS Policy, all team members are required to stay with the team in the team venue. The coaches and the GNS Program Committees will make the rooming assignments. Athletes will be the responsibility of the coaches and team support staff.

#### Registration -

**\$80.00** per athlete (includes closing athlete banquet on Sunday, May 8<sup>th</sup>)

#### Cost Share Amount -

**\$50.00** per athlete –amount helps fund expenses of 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 bus
- Friday breakfast, lunch, supper and snacks
- Saturday breakfast, lunch, supper and snacks
- Sunday breakfast, lunch, and snacks
- Monday breakfast, lunch, supper and snacks for the bus

#### **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 blue pants. Club coaches are responsible for ensuring that all **gymnasts from their club are outfitted properly.** Please contact Uniforms Director, Wendy Cruickshank at <a href="wendy.cruickshank@hotmail.com">wendy.cruickshank@hotmail.com</a> or the GNS office at <a href="mailto:gns@sportnovascotia.ca">gns@sportnovascotia.ca</a> if there are any problems.

<u>Payment for track jackets, girl's leotards, boy's singlets, pants and shorts will be made to your club</u> 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 Easterns Artistic and the Easterns T&T sections of the GNS website. The tentative competition schedule will also be posted on the GNS website once it is distributed but please remember that it might be tentative.

#### **Competition Venue -**

Stade Telus 2380, rue du PEPS Laval University, Quebec City, QC

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



Witness Name:\_\_

# **Gymnastics Nova Scotia**

## Participant's Informed Consent Form (18 & over)

Event:I	<u> Eastern Canadian Gymn</u>	astics and T&T Championships
Event Location:	Quebec City, Quel	рес
Event Date:	May 5-9, 2016	
PLEASE READ CAI	REFULLY	
named event may result in muscles, tendons, interna aspects of the body, and	n personal injury (including but al organs, and other aspects of in rare occurrences, death, cor	hat traveling to and from and participation in the above not limited to: injury to bones, joints, ligaments, the skeletal system and potential impairment to other mplete or partial paralysis, or brain damage) and and hereby agree to participate voluntarily and at my
and hereby agree to abid Release: I hereby grant to any written information (e	e by the rules and regulations of Gymnastics Nova Scotia the excluding information contained	esigned for the safety and protection of participants set down by the event Organizing Committee. Media right to use, without payment of any fee or charge, on the Medical Form), photograph, video tape or he purpose of media and provincial association
o RELEASE, SAVE HAR agents from and against or damage to my person with my association with participating in and return NDEMNIFY Gymnastics actions, claims, demands association with or entry against any person, socia Gymnastics Nova Scotia,	RMLESS AND INDEMNIFY Gyr all claims, actions, costs and ex- or property where so ever and or entry in the above athletic m- ning from the said athletic meet. Nova Scotia, the Association, to s, losses, judgments or costs of in the said athletic meet and I a ety, corporation or other legal entre organizers and/or its agen	ry in the event, I, intending to be legally bound, agree mnastics Nova Scotia, the Organizers and/or its expenses and demands in respect to death, injury, loss howsoever caused, arising out of, or in connection eet or which may arise out of my traveling to or . I further agree to HOLD HARMLESS AND the Organizers and/or its agents from any and all any nature to any third party resulting from my agree not to make any claims or take any proceedings ntity who might claim contribution or indemnity from its in respect of matters which are subject of this executors, administrators and assigns.
confirm that I am of th nformed Consent Form		ead, understood and agree to the contents of this
Participant's Name :	(Please Print)	Date of Birth:





# Athlete's Waiver Form/ Formulaire De Desistement

### 2016 Eastern Canadian Gymnastics Championships Championnats est du Canada de gymnastique 2016

In consideration of your acceptance of my participation I, intending to be legally bound, do hereby, for myself, my heirs, executors and administrators waive and release and forever discharge any and all rights and claims for losses, damages and/or injuries which I may have or may hereafter accrue to me against Gymnastique Québec, the Organizers or their respective officers, agents, representatives, and/or assigns for any and all losses, damages and injuries which may be sustained and suffered by me 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 said athletic meet.

En retour de l'acceptation de ma participation, je, pour ma part et pour mes héritiers, exécuteurs testamentaires, administrateurs et ayants droit, libère Gymnastics Québec, les organisateurs et diriaeants, leurs leurs agents, représentants respectifs et renonce à tout droit, réclamation, demande ou poursuite blessures découlant pertes, de dommages subis durant ou suite à ma participation à cette manifestation sportive ainsi qu'aux voyages et déplacements à l'aller et au retour reliés à cette manifestation.

Participant's Name / Nom du participant	Date	
Participant's Signature / Signature du participant	Date	
Parent/Guardian (if under 18) / Parent/tuteur (si moins de 18)	Data	



## **Gymnastics Nova Scotia**

# **Record Of Medical Information**

Athlete Name:	
Address:	Emerg Contact:
City/Prov:Postal Code:	Relationship: Emergency Ph:
Phone #:	
Cell phone #:	
Birthdate: D M Y	
e-mail address:	
Provincial Plan # & Expiry Date (MSI for NS)	S):
emergency	allergies or conditions that may be important in an
In the event of medical treatment parer emergency number noted above.	nts and or guardians will be contacted at the
RECORD OF MEDIC	CAL CONSENT FOR MINORS
	e permission for my son / daughter to receive stered by qualified staff and / or Physicians.
Date:	
PARENT / GUARDIAN	WITNESS
Name:	Name:
Signature:	Signature:
Relationship:	Relationship:



## GNS Fair Play Contract

, as an ambassador and representative for the province of Nova Scotia, shall abide by				
he spirit and guidelines of the Fair Play Codes for participants.				
Participant Guidelines				
Dur Fair Play Code				
<b>Respect</b> 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.				
<b>Participation</b> 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)