



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

COVER: Forms A → L

Proposed Name of Event

Proposed Calendar Date(s)

It is not a requirement of sanctioning that a race director insure his or her event under the TA whole of sport policy. Race Directors are able to source insurance independently. It is a requirement of sanctioning however, that the insurance cover is at least equal to that provided under the TA policy.

Public Liability Insurance Cover - \$20M (where TA insurance is sought)

Private race promoter/affiliated clubs	Cover \$20 million	Premium
Sanctioned event that allows non-TA members to compete and a field greater than 100 entrants		\$465.00
All other events (inc. Aquathlon, Duathlon and open Club events with more than 100 entrants)		\$270.00
Club Sanctioned Events that allows own club members only AND maximum field 100 entrants		Nil

What Forms are in the National Sanctioning Document?

FORM	DESCRIPTION	RESPONSIBLE
A	Race Date Application	RD
B	Application to Conduct a Sanctioned Event	RD
C	Application to Conduct a Previously Sanctioned Event	RD
D-E	Notification of Sanctioning Decision & Sanctioned Event Public Liability Insurance Application	TD / Sanctioning Officer & RD
F	Sanctioned Event Invoice	RD to STTA
G	Event Report – Technical, Medical, Race Director	NTD / TD, Medical Director, RD
H	Copyright Notice	For RD information
I	Notice of Possible Insurance Claim Form	RD
J	Sample Participant's Agreement	For RD information
K	Fit and Proper Persons Form	RD
L	One Race Members Form	RD

Attachments

Letter:	Attached?	Comments
Entry Form	Yes <input type="checkbox"/> No <input type="checkbox"/>	Draft / Final
Local Government Authority (Council) Approval	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Police Approval	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other Approval	Yes <input type="checkbox"/> No <input type="checkbox"/>	

If these letters are unavailable at the time of sending the application, the application will still be processed. However, an offer of sanctioning approval will be withheld, pending receipt of the relevant letters of approval.

This application must be lodged **before entry forms are printed**. Please complete legibly and return to:

TA for ATS, HIM, IM and National Championship events;
Your State/Territory Triathlon Association (STTA) for all other events

Official Use Only:

Date Sent	Date Received	Sanction Fee	Sanction Date Issued	Cheque Amount (Attached):	Receipt Number
_____	_____	\$ _____	_____	\$ _____	_____

What Race Directors need to know...

TA and the Triathlon Australia Technical Committee (TATC) created the National Sanctioning Document (NSD), with assistance from race directors and administrators. This document first made available in 2003 serves to provide consistency to sanctioning for race directors Australia wide.

In order to assist the race director with the process, below is what you need to know when applying for event sanctioning.

NOTE: The distance used to determine the One Day Race Member fee (ODRM) is:

Individuals

a) 15% of the advertised entry fee with a minimum of \$3 and a maximum of \$20.

Teams

a) 15% of the advertised entry fee with a minimum of \$9 and a maximum of \$20.

STEP	PROCESS	FORM	WHO
1	Apply for a Race Date for a sanctioned event ➢ Contact your STTA	A	RD
2	Copyright Notice and Fit and Proper Persons Form ➢ To be completed and signed by the Race Director and returned to TA or the relevant STTA with Form A (Race Date Application) ➢ To be completed and signed by the Race Director and returned to TA or the relevant STTA with Form A the (Race Date Application)	H K	RD
3	Receive National Sanctioning Doc, Guidelines and STTA doc(s) ➢ TA National Sanctioning Guidelines sent once for referral ➢ STTA Sanctioning Guidelines sent once for referral ➢ Refer to TA Race Operations Manual ➢ Consider sample Participant's Agreement ➢ Refer to copyright notice	TA Guidelines, STTA Guidelines, Cover, Forms B or C, E → F, H → L	STTA
4	Apply for event sanctioning ➢ Event sanctioned last season, same course, same Race Director? ➢ New event, new venue, course design or Race Director? ➢ Taking out TA's whole of Sport policy as event insurance? Send in Form D-E AND your insurance premium cheque with sanctioning docs ➢ Provide a copy of your Entry Form prior to public release. If you have online entry only, provide URL (web address) for inspection	C (ignore B) B (ignore C) D-E J	RD
5	Notification of Sanctioning Decision & Event Public Liability Insurance Application ➢ Appointed Technical Delegate or sanctioning officer to consider sanctioning detail provided and contact RD. ➢ Event Public Liability Insurance Application	D-E	TD/SO RD
6	Race Day		RD
7	Notice of possible insurance Claim ➢ Any incident(s) occur at the event warranting possible insurance claim(s)? Report(s) to be submitted to TA within 48hours of incident	I	RD
8	Sanctioned Event Invoice and One Race Members Form ➢ Complete the Invoice and ORM Form and send (email/disc/CD) to the STTA & TA with payment within 14 days after the event. * If the event is part of the ATS, IM, HIM or National Championships the technical services fee is to be paid to TA and can be remitted with payment of ORMs.	F & L	RD
9	Post Event Reports ➢ Medical Director to complete Medical Report within 14 days after Race Date and provide to TD ➢ NTD / TD to complete Technical Report within 14 days after Race Date and provide (including copy of Medical Report) to RD ➢ RD to complete Race Director Report within 14 days after Race Date and provide to TD / Sanctioning Officer	G – Medical G – Technical G – Race Director	Medical NTD/TD RD
NOTE	➢ Copy of Sanctioning Documents to be retained by RD ➢ Copy of Sanctioning Documents and all post-event reports to be retained by STTA/TA ➢ TD / Sanctioning Officer to liaise with RD based on sanctioning documentation and previous race report (where available) prior to event		



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

RACE DATE APPLICATION

FORM A

The following Form is to be completed in order to secure a race date for a TA / STTA sanctioned event.

A deposit of \$_____ (incl. GST) is to accompany each Race Date Application.

This deposit will be deducted from the sanction fees owing to the STTA upon the completion of the race. Applications will be considered as they are received on a geographical and historical basis.

Date clashes in the same geographical area will be advised so other arrangements can be made.

Race dates not confirmed by the payment of \$_____ (incl. GST) will not be included in official calendars.

1. EVENT DETAILS

Proposed Name of Event

Proposed Date(s)

Location of Start/Finish

Town/Suburb **Start Time**

Local Government (Council) Area(s) in which course will enter

Police Station authorising event

Event type (tick one or more) **Triathlon** **Aquathlon** **Duathlon** **Other**

Distance Category: **Short** **Sprint** (750/20/5) **Olympic** (1.5/40/10) **Long** **Other**

Event Distances: Swim / Run: m / km **Cycle** km

Run: km **Other:** m / km

Order of legs:

Other information (eg. teams only etc):

Has this event been sanctioned before? Yes No

Prize Money: Yes No **Amount \$** _____

Entry Fee: Member \$ **Non Member \$**

2. ORGANISER DETAILS

Name of Organisation

Race Director/Organiser

Address

Postcode

Telephone (W) (H)

(M) E-mail Address

3. STATUS OF EVENT APPLICATION

- | | | | |
|------------------------|--------------------------|---|--------------------------|
| NATIONAL SERIES status | <input type="checkbox"/> | TA TOUR status | <input type="checkbox"/> |
| CHAMPIONSHIP status | <input type="checkbox"/> | PREMIER / STATE SERIES status | <input type="checkbox"/> |
| SPRINT SERIES status | <input type="checkbox"/> | JUNIOR status | <input type="checkbox"/> |
| MASTERS status | <input type="checkbox"/> | CLUB (Triathlon Club) status | <input type="checkbox"/> |
| LOCAL status | <input type="checkbox"/> | TEAMS ONLY status (eg. Corporate Teams) | <input type="checkbox"/> |

If applying for Championship status, which one? State National
Duathlon Aquathlon Interclub Sprint Olympic Long

4. OTHER INFORMATION

Eg. Backup info to support application in case of multiple requests, State Championship applications, etc

5. AGREEMENT

I, _____ on the behalf of

declare as follows:

1. I agree to all the above and will ensure that the above conditions will apply to our event unless previously agreed to by the Technical Delegate/Sanctioning Officer appointed to our event;
2. I have read and understood the safety guidelines outlined and recognise that it is my responsibility to conduct a fair and safe event;
3. I understand that the guidelines are a summary of the requirements of conducting a sanctioned event and certain circumstances may require further precautions and actions;
4. I acknowledge that, the appointed sanctioning officer (Technical Delegate) has the authority to withdraw sanctioning or recommend cancellation of the event, if in his/her opinion, these minimum safety requirements are not in place and may announce publicly before the commencement of the race the withdrawal of sanctioning and insurance cover if applicable;
5. I understand that the information supplied on this form for inclusion on the Calendar of Events will be regarded as a commitment to sanction the event;
6. I will notify the Sanctioning Officer/Technical Delegate of any changes submitted in this application as soon as practicable;
7. I will include a waiver or release on my entry form that satisfies the State Triathlon Body's reasonable requirements.

The Race Director/Event Organiser:

_____	_____	_____
Name of race director/promoter	Signature of race director/promoter	Date

THE ABOVE APPLICATION AND PAYMENT ARE TO BE COMPLETED AND FORWARDED TO:

Please retain a Copy of This Application For Your Records



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT APPLICATION TO CONDUCT A SANCTIONED EVENT FORM B

Has this event been sanctioned before?

Yes

No

If 'Yes', the event was held last season and there are no changes to the course or Race Director, you may use FORM C. In all other instances this form (FORM B) must be used.

This application must be lodged **at least 28 days** prior to the event.

Information from this application may be used for advertising, calendars, and public information.

PART 1 - SANCTIONING APPLICATION SUMMARY

Name of event:

Date:

Location:

Race organiser entity eg. CO, C'TEE, club:.....

Race director(s):

Address:.....

Telephone (W): Telephone (H):

Telephone (M): Email:

Prize money: YES / NO If yes, then state amount: \$

(NOTE: Triathlon Australia has a policy of equal division of prize money for male and female competitors plus 5 year age groupings where possible.)

Communication system(s) to be used to cover event course:

.....
.....

No. of participants expected:.....

Upper limit of participants:

RACE DETAILS

Please complete every detail. Use additional pages if necessary.

Type of event:.....

Distance category:

- | | |
|---|--|
| <input type="checkbox"/> Short | <input type="checkbox"/> Sprint (750/20/5) |
| <input type="checkbox"/> Triathlon Distance (1.5/40/10) | <input type="checkbox"/> Long |
| <input type="checkbox"/> Ultra | <input type="checkbox"/> Other |

Numeric order and distance of each leg:

RACE 1

Swim	Cycle	Run
-------------	--------------	------------

Order:	Order:	Order:
Distance:	Distance:	Distance:

RACE 2

Swim	Cycle	Run
-------------	--------------	------------

Order:	Order:	Order:
Distance:	Distance:	Distance:

RACE 3

Swim	Cycle	Run
-------------	--------------	------------

Order:	Order:	Order:
Distance:	Distance:	Distance:

Planned start time:

Expected finish time – winner:

Expected finish time – last group of athletes:

Points of special interest or history of the race:

.....

Public address system available?..... YES / NO

Portable megaphone? YES / NO

Announcer’s name..... PROFESSIONAL / AMATEUR

Communications two way radios YES / NO

PART 2 – RACE MANAGEMENT PLAN

The Race Director must disclose all information requested in this Part in order that **(Insert STTA)** and its insurer can assess the risks associated with the event.

Police Approval

For any proposed event that uses a public road for any part of that event, it is the Race Director’s responsibility to complete and submit a Traffic Management Plan (TMP) to the Local Area Commander of the events locality. The Race Director must **supply** the corresponding letter from the Local Area Commander stating that from a traffic management point of view, the proposed course and date is **approved**

Council Approval

The Race Director must **supply** a letter of approval, in principle, from the relevant local government authority (council). The letter must **confirm** consent as to the location and use of any public facilities on the date of the proposed event.

STTA Approval

Once the event is sanctioned by TA / STTA, the Race Director will be sent a Sanctioning Certificate, endorsed by the Technical Delegate / Sanctioning officer.

Approval from Various Authorities

Depending upon the nature of the event, approaches will need to be made to various authorities for assistance and/or approval in principle, to date and venue. It is recommended that prior to this submission being forwarded that approaches be made to the following authorities where applicable to foreshadow the conduct of the event: -

- | | |
|--|--|
| <input type="checkbox"/> Water authorities | <input type="checkbox"/> St John's Ambulance |
| <input type="checkbox"/> National Parks & Wildlife | <input type="checkbox"/> Red Cross |
| <input type="checkbox"/> State Emergency Services | <input type="checkbox"/> Local Hospital |
| <input type="checkbox"/> Ambulance Service | <input type="checkbox"/> Roads and Traffic Authority |
| <input type="checkbox"/> Sports physio groups | |

Swim Course

Actual Distance: m/km **Method used to measure course:**

Type of Swim: Pool Lake Ocean Bay River
Other: **Tides:** Yes No

Swim Start line: Beach Shoreline Waist deep Deep Water

Distance of 1st turn from Start: **Course** (One way, loop etc):

Wave Starts: Yes No (Provide details on wave start times and sequence).....

Anticipated water temperature:°C Number of IRB's:

NOTE: Wetsuits are **PROHIBITED** in certain conditions. Consult the TA Race Competition Rules. The Technical Delegate will measure the water temperature on race day and advise the ruling.

Water Safety: By whom (SLSC, SES, etc) **All Qualified?** Yes No

Total number of Personnel: **Number of Boards:**

NOTE: A minimum quota of rescue craft to competitors must be considered. IRB's must be equipped with a propeller guard.

Type of watercraft to be used by Technical Officials:

Please outline your plans for water safety:

.....
.....
Communications Systems in use: **(details)**

.....
EVACUATION PLAN: The Race Director will be expected to have in place an agreed evacuation plan with water safety personnel. This plan must include the communication system identified above and be communicated appropriately between the Race Director, all water personnel and the Technical Team.

Has this particular swim course been previously sanctioned? Yes No

If 'Yes', when?

DIAGRAM:

Complete a **diagram** of the **Swim Course** and attach, showing direction, location of **turning buoys**, line of sight markers, **start line**, **swim exit point including chute to transition entry**, **safety personnel** (on **paddle boards** including **controlling swim turns**), **boats (IRB's)**, etc.

Cycle Course

Actual Distance: m/km **Is the course IAAF certified?** Yes No

How was the course measured:

Surface Type: **Will corners/roads be swept?** Yes No

Road Closures / Restrictions:

Any U-turns located at the bottom of a hill or downward slope? Yes No (avoided)

Will residents / businesses along the cycle course be informed? Yes No

WATER/AID STATIONS: should only be considered where cycle courses are greater than 50km. If the Race Director is considering including these, thought must be given to location, access by competitors and positioning not being on the course. Discuss this with the Technical Delegate.

Explain course configuration (looped, out and back etc.)

.....
Explain Traffic Control safety plan including road closures/restrictions (communications used, etc.)

.....
Number of marshalls on the cycle course:

.....
Cycle course map MUST illustrate marshal positions.

Provide details of your Lead and Sweep Vehicle? (Type, Warning Lights, for breakdown, marshal pick up etc)

.....
How many Motorcycles do you intend to provide to Technical Officials?

Will appropriate signage be placed on the course to warn the public? Yes No

Police Presence: Yes No (Police should notify you if a presence will occur)

Media Vehicles: Yes No **Number** (if 'Yes').....

Outline plan for crowd control (fencing, bunting etc.)
.....

Do runners share the cycle course? Yes No **If 'Yes', precautions taken to avoid collisions:**
.....
.....

Has this particular cycle course been previously sanctioned? Yes No **If 'Yes', when?**
NOTE: All traffic marshalls must be a MINIMUM AGE of 18 years.

DIAGRAM:

Attach a **MAP** of the **cycle course** showing all traffic control personnel, aid stations, existing traffic signals and the method of monitoring at each intersection. (Use a **large locality or road map**).

Run Course

Actual Distance: m/km **Is the course IAAF certified?** Yes No

How was the course measured:

..... **Will corners/roads be swept?** Yes No

Surface Type: Bitumen Paved Dirt Grass Other

Will residents / businesses along the cycle course be informed? Yes No

Explain course configuration (looped, out and back etc.)
.....

Is the Run solely on pathways? Yes No **If 'No', Road Closures / Restrictions:**
.....

Number of marshalls on the run course:.....
.....

Run course map MUST illustrate marshall positions.

Provide details of your Lead and Sweep Vehicle? (Type, Warning Lights, for breakdown, marshal pick up etc)
.....

Will appropriate signage be placed on the course to warn the public? Yes No

Outline plan for crowd control (fencing, bunting etc.)
.....

Explain overall safety plan (communications used, number of safety personnel, aid stations etc.)
.....
.....

Will you provide a secure Finish Area? Yes No

Will medical personnel and catchers be present at the finish line? Yes No

Has this particular run course been previously sanctioned? Yes when _____ No

NOTE: All marshalls must be a MINIMUM AGE of 18 years.

DIAGRAM:

Attach a **MAP** of the **run course** (including **finish line** and **athlete recovery area**), showing all traffic personnel, safety personnel, aid stations etc. (Use a **large locality or road map**).

Aid Stations

Number of aid/water stations including Competitor Recovery Area?

Where are ALL aid / water stations located? (eg. run 1.5km, run turnaround, registration, swim exit etc)

The **distance** between drink stations should be **no more than 2km**.

Total Aid Station Marshalls used: **No. of marshalls/station:**

A **minimum of two (2) marshalls** per drink station is required. This is dependant on number of competitors.

Types of aid / drinks / food provided, including Recovery Area:

What Occupational Health and Safety precautions will you implement (eg. sealed containers, gloves)?

Ensure an adequate supply of gloves is available at all aid and recovery stations.

Include on the **Course maps** and **Transition Area maps** locations of **Aid Stations** (including Athlete Recovery Area) and **Aid Station personnel**.

Transition Area(s)

Fencing Details (Type/Height)

Surface Type: Bitumen Paved Dirt Grass Other

Bicycle racks – Type **Numbered?** Yes No

Will the Transition Area be ordered (sectioned) by category? Yes No

Will you provide a secure Competitors Bag Storage Area? Yes No

Will the Transition for all competitors be even? Yes No

An **EVEN Transition** is where **all competitors run the same distance with their bike**. Transitions should be set such that **flow on each occasion is in the same direction**.

Marshall Numbers (Total) (show marshall locations on your map)

Security - details (marshall function, use of entry/exit points only etc.)

The Transition Area **should be secure only to competitors and Technical Officials, the Race Director and designated marshalls**. Competitors must not be granted access to Transition whilst the event is in progress until at a minimum the last cyclist returns from the cycle course. The Race Director is to control security.

Which change areas / toilets are available? Men Women Mixed

(Number of Men/Women/Mixed/Disabled, location).....

NOTE: Be sure Transition Area(s) flow pattern does **not include crossovers** and/or **unsafe congestion**.

Attach a **LARGE MAP** of the **Transition Area(s)** including showing **location(s)** on **cycle course / run course maps**. Detail **entry/exit points, rack positions, transition flow, mount/dismount, spectator areas, medical, marshall positions, etc.**

Media

Please outline arrangements for accrediting, servicing and controlling media:

.....

.....

Emergency Medical Contingency Plans

Name of Medical Group

NOTE: A parent who is a qualified doctor is **insufficient medical coverage** for an event.

Medical Director's Name:

Phone: (day) **(ah)**

(fax) **(Mobile)**

Medical Staff attending (Number of Doctors, Nurses etc)

Medical tent – Location **Type** (Tent/van/clubhouse etc)

Will there be Drug testing? Yes No **Facilities available if required?** Yes No

Will an ambulance(s) be present at the event (Highly recommended)? Yes No

Has the nearest Hospital / Ambulance Station been notified of this event? Yes No
If 'No', the nearest ambulance station **MUST be put on notice** of the event.

Nearest Hospital / Ambulance Station Name

Telephone number

How long will it take in minutes for the ambulance to arrive at the event?

Outline your dedicated EMERGENCY MEDICAL PLAN (communications, mobile doctor etc.)

.....

.....

Organising Committee/Structure

Who are the people involved with the event?

Swim Course: **Cycle Course:**

Run Course: **Transition Area:**

Finish line Area: Registration:

Please outline your chains of command, personnel and responsibilities:

.....

Scaffolding and Spectator Stands

Will scaffolding be erected anywhere on the course?

Yes No

If 'Yes', for what purpose?

.....

Scaffolding must be constructed by a qualified engineer or licenced scaffolder.

Personnel Requirements

Task	No. Req'd	Totals	Source of People
Before the Race			
Site Set-Up			
Registrations			
TOTAL BEFORE RACE			
During the Race			
Timing			
Transition Area			
Swim Course			
Lead Vehicle			
Cycle Marshals			
Sweep Vehicle (sag wagon)			
Run Marshalls			
Police			
Drink/Aid Stations			
Technical Officials			
Motor Bike Riders			
Medical Personnel			
Catering			
Results Recording			
TOTAL DURING RACE			

After the Race			
Presentation			
Site Pull Down			
Licensed Truck Driver			
TOTAL AFTER RACE			
GRAND TOTAL			

Do you have any concerns about your liability to recruit the required number of personnel? Please comment on past experiences:

.....
.....

PART 3 – SANCTIONING AGREEMENT

In consideration of Triathlon Australia Limited and/or **[Insert STTA]** (“**the Authority**”) considering this race sanction application, the Race Director and Authority agree as follows:

1. Sanctioning is neither automatic nor irrevocable. The Authority, at its absolute discretion, may conditionally or unconditionally sanction, refuse to sanction, or withdraw its sanction of the event. For example, the Authority might withhold or withdraw a sanction if it considers the event risks competitor or public safety, to be unprofessionally organised, to be financially under-resourced, to breach the Authority’s rules or policies, or to be detrimental to the promotional or regulatory interests of the Authority. The Race Director has no claim against the Authority in respect of any determination made by it.
2. The Authority reserves the right to change or amend its sanctioning policies, procedures and requirements from time to time.
3. If sanctioned, the Race Director must comply with all rules and directions made by the Authority in respect of the conduct of this event and all conditions of any sanction conferred by the Authority. Failure to comply with any of these rules, directions or conditions entitles the Authority to (amongst other things) withdraw any sanction at any time.
4. If the Authority declines to sanction the event or, having sanctioned the event, elects to withdraw its sanction for any reason, the Race Director irrevocably authorises the Authority to publish the fact, nature and reasons for its decision to decline or withdraw sanctioning to any person the Authority thinks fit, including (but not limited to) prospective competitors, sponsors and the general public.
5. It is the Race Director’s responsibility to conduct a safe and fair event. Any standards and conditions imposed by the Authority for this event and events generally are minimal standards only. The Race Director acknowledges that:
 - (a) an event is not necessarily safe or viable because it is sanctioned by the Authority;
 - (b) special or unusual conditions may require further precautions and actions in the interests of competitor or spectator safety; and
 - (c) public liability insurance cover and competitor race permit insurance cover arranged by the Authority or required by the Authority as a condition of sanction, although negotiated and arranged in good faith by the Authority, might not cover all risks to the Race Director or competitors associated with the event. The Authority does not warrant that the terms and coverage of any such insurance are adequate for the purposes of the Race Director or competitors and the Race Director must satisfy itself that it is adequately insured.
6. The Race Director must not advertise the event as sanctioned unless and until the Authority has sanctioned it and all conditions of sanctioning have been complied with. If the Authority withdraws any sanction, the Race Director must:
 - (a) prior to the event, advise all competitors and prospective competitors of withdrawal of the sanction; and
 - (b) remove any references to the Authority’s sanction from advertising or promotional material for the event.

7. The Race Director releases the Authority and its officers, directors, employees and agents in any way connected with the sanctioning process or the conduct of the event from and will indemnify them against all claims, loss and liabilities (including claims in negligence against them) made or incurred by the Race Director or any other person in respect of the conduct or sanctioning of the event, including (but not limited to) for example:
- (a) personal or property damage to participants and spectators; and
 - (b) economic or other loss incurred by sponsors or others associated with the conduct or marketing of the event.

Name of race director/promoter	Signature of race director/promoter	Date

Name of TD / Sanctioning Officer	Signature of TD / Sanctioning Officer	Date

THE ABOVE APPLICATION AND PAYMENT ARE TO BE COMPLETED AND FORWARDED TO:
[Insert address of STTA]

Please retain a Copy of This Application For Your Records



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

APPLICATION TO CONDUCT A PREVIOUSLY SANCTIONED EVENT

FORM C

Was this event sanctioned last season and managed by the same race director? Yes No

Are there any variations to the previous sanctioning details? Yes No

This Form is only to be used for unaltered events previously sanctioned (last season) and managed by the same Race Director. Therefore, if you answer 'YES' for question one (1) above and 'NO' for question two (2), then complete this form (FORM C) instead of Form B. All other sanctioning requirements still apply. If you are uncertain, contact your STTA.

NOTE: FORM C can be used for TWO (2) years in succession, then the race director MUST return to FORM B.

This application must be lodged **at least 28 days** prior to the event and prior to entry forms being printed.

Information from this application may be used for advertising, calendars, and public information.

PART 1 - SANCTIONING APPLICATION SUMMARY

Name of event:

Date:

Location:

Start time:

Race organiser:

Race Director(s):

Address:

Telephone (W): Telephone (H):

E-mail:

Assistant Race Director:

Address:

Telephone (W): Telephone (H):

Prize money: YES / NO If yes, then state amount: \$

When was the event previously sanctioned?

PART 2 - COMPETITION DETAILS

RACE 1

Swim	Cycle	Run
Order:	Order:	Order:
Distance:	Distance:	Distance:

RACE 2

Swim	Cycle	Run
Order:	Order:	Order:
Distance:	Distance:	Distance:

RACE 3

Swim	Cycle	Run
Order:	Order:	Order:
Distance:	Distance:	Distance:

1. On additional pages, describe any potential hazards specific to your race, or any aspects of your race, which may not comply with the TA National Sanctioning Policy and/or the TA Race Operations Manual.
2. Attach copies of course maps.
3. Attach details of any MINOR changes. If the event has MAJOR changes, please use **Form B**.
4. All relevant authorities (Police, Council etc) have been fully consulted..... YES / NO

PART 3 – SANCTIONING AGREEMENT

In consideration of Triathlon Australia Limited and/or [Insert STTA] (“the Authority”) considering this race sanction application, the Race Director and Authority agree as follows:

2. Sanctioning is neither automatic nor irrevocable. The Authority, at its absolute discretion, may conditionally or unconditionally sanction, refuse to sanction, or withdraw its sanction of the event. For example, the Authority might withhold or withdraw a sanction if it considers the event risks competitor or public safety, to be unprofessionally organised, to be financially under-resourced, to breach the Authority’s rules or policies, or to be detrimental to the promotional or regulatory interests of the Authority. The Race Director has no claim against the Authority in respect of any determination made by it.
2. The Authority reserves the right to change or amend its sanctioning policies, procedures and requirements from time to time.
3. If sanctioned, the Race Director must comply with all rules and directions made by the Authority in respect of the conduct of this event and all conditions of any sanction conferred by the Authority. Failure to comply with any of these rules, directions or conditions entitles the Authority to (amongst other things) withdraw any sanction at any time.
4. If the Authority declines to sanction the event or, having sanctioned the event, elects to withdraw its sanction for any reason, the Race Director irrevocably authorises the Authority to publish the fact, nature and reasons for its decision to decline or withdraw sanctioning to any person the Authority thinks fit, including (but not limited to) prospective competitors, sponsors and the general public.

8. It is the Race Director's responsibility to conduct a safe and fair event. Any standards and conditions imposed by the Authority for this event and events generally are minimal standards only. The Race Director acknowledges that:
 - (d) an event is not necessarily safe or viable because it is sanctioned by the Authority;
 - (e) special or unusual conditions may require further precautions and actions in the interests of competitor or spectator safety; and
 - (f) public liability insurance cover and competitor race permit insurance cover arranged by the Authority or required by the Authority as a condition of sanction, although negotiated and arranged in good faith by the Authority, might not cover all risks to the Race Director or competitors associated with the event. The Authority does not warrant that the terms and coverage of any such insurance are adequate for the purposes of the Race Director or competitors and the Race Director must satisfy itself that it is adequately insured.

9. The Race Director must not advertise the event as sanctioned unless and until the Authority has sanctioned it and all conditions of sanctioning have been complied with. If the Authority withdraws any sanction, the Race Director must:
 - (c) prior to the event, advise all competitors and prospective competitors of withdrawal of the sanction; and
 - (d) remove any references to the Authority's sanction from advertising or promotional material for the event.

10. The Race Director releases the Authority and its officers, directors, employees and agents in any way connected with the sanctioning process or the conduct of the event from and will indemnify them against all claims, loss and liabilities (including claims in negligence against them) made or incurred by the Race Director or any other person in respect of the conduct or sanctioning of the event, including (but not limited to) for example:
 - (c) personal or property damage to participants and spectators; and
 - (d) economic or other loss incurred by sponsors or others associated with the conduct or marketing of the event.

Name of race director/promoter	Signature of race director/promoter	Date

Name of TD / Sanctioning Officer	Signature of TD / Sanctioning Officer	Date

THE ABOVE APPLICATION AND PAYMENT ARE TO BE COMPLETED AND FORWARDED TO:
[Insert address of STTA]

Please retain a Copy of This Application For Your Records



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

NOTIFICATION OF SANCTIONING DECISION & SANCTIONED EVENT PUBLIC LIABILITY INSURANCE

FORM D-E

EVENT DETAILS

Event Name:

Venue: Event Date:

Race Director:

Address: State:

Postcode: Email:

Phone: Fax:

Event State: NSW ACT SA WA QLD VIC NT TAS

State Series/Champs: Y N ATS HIM IM AUS Champ

Event Type: (tick one or more) Triathlon Aquathlon Duathlon Other

If other please specify.....

Race 1: Distance Race 2: Distance Race 3: Distance.....

Estimated number of participants in total:

Entry Fee: Race 1: Individual..... Team.....

Race 2: Individual..... Team.....

Race 3: Individual..... Team.....

Note Interested Parties:

1..... 2.....

3..... 4.....

Are any special conditions Applicable? Y N

1..... 2.....

Is scaffolding being erected?

PREMIUMS

- The Reason for refusal to grant sanctioning will be notified by a letter attached to this notification.
- Any additional comments or special conditions will be advised by separate attachment.
- The STTA/TA will provide Technical resources in consultation with the Race Director including a Race Referee.

Sanctioning Approval Granted? Yes No TA Insurance: Yes No

Tax Invoice ABN: 67 007 356 907 \$465 \$270 (GST INC) for \$20 MILLION Public Liability
(Refer to 'COVER' page of the National Sanctioning Document for table of premium categories)

This application is to be completed, signed by the RD and forwarded to your STTA (or TA if TA is directly sanctioning the event) with all other required sanctioning documents at least **28 days prior to the event**.
Your STTA (or TA) will then remit to and receive the documentation from the SO once approval has been granted, forward documentation to TA to obtain a COC (where required) with TA issuing a COC to the RD upon receipt of the above premium payment.
Please note TA is unable to issue a COC unless the premium has been paid prior to the event, all post event paperwork has been submitted and all ORMs for previous events have been paid in full.

“DECLARATION”

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or mis-stated. Completion of this form does not bind coverage.

“YOU’RE DUTY OF DISCLOSURE”

Before you enter into a contract of General Insurance with TA, you have a duty under the Insurance Contracts Act 1984 to disclose to us every matter you know or could reasonably be expected to know that is relevant to our decision whether to accept the risk of the Insurance and, if so, on what terms. You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate your Insurance.

Your duty, however, does not require disclosure of any matter:

- That diminishes the risk to be undertaken by us.
- That is of common knowledge.
- That we know, or, in the ordinary course of our business ought to know.
- As to which compliance with your duty is waived by us.

“NON-DISCLOSURE”

If you fail to comply with your duty of disclosure, TA may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract if your non-disclosure is fraudulent; they may also have the option of avoiding the contract from its beginning.

Name of race director/promoter	Signature of race director/promoter	Date

Technical Delegate: **Phone:**

Comments and Conditions:

1. If using TA’s whole of Sport Policy, this form must be completed, signed by RD and forwarded to your STTA (or TA) with all other required sanctioning documents at least **28 days prior to the event**. Your STTA will then remit to and receive the documentation from the SO once approval has been granted, forward documentation to TA to obtain a COC (where required) with TA issuing a COC to RD upon receipt of the above premium payment. For Insurance cover or any questions please contact Linda Smith, Triathlon Australia - Telephone (02) 9972 7999.
2. Technical Services Fee must be paid to the STTA (or TA if TA directly sanctions) by **no later than 14 days after the event**, together with any other outstanding fees.
3. Form F: Sanctioned Event One Race Membership invoice must be completed and forwarded with appropriate fees to TA **no later than 14 days after the event**. (refer to Form F for ORM prices).
4. Form L: One Race Members must be completed and forwarded to both the STTA and TA via email or post **within 14 Days of the conduct of a sanctioned event**.
5. You must advise the STTA and TA (**within 48 hours of the incident**) of any possible insurance claim arising from the event by completing the relevant insurance claim forms.
6. To ensure sanctioning approval is maintained, the RD is to immediately advise TA of any changes that are required to be made to the COC. **Changes will incur a \$50 administration fee payable to TA for the first change and \$30 for every change thereafter.**

Approved and Signed by: **Sanctioning Officer** **Technical Delegate**

Name	Signature	Date
Telephone	Facsimile charges	E-mail

TD / SANCTIONING OFFICER TO FORWARD (EMAIL/POST) TO RACE DIRECTOR AND TA

**Linda Smith, Triathlon Australia, PO Box 6039, FRENCHS FOREST DC, NSW 2086
Phone: 02 9972 7999, Fax: 02 9972 7998 Email: linda@triathlon.org.au**

Please retain a Copy of This Application as a Tax Invoice



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

SANCTIONED EVENT INVOICE

FORM F

Event Name:

Event Date: **Race Director:**

Phone: **Email:**

Event Type: (tick one or more) **Triathlon** **Aquathlon** **Duathlon** **Other**

Distance Category: **Below Sprint** (below 750/20/5) **Sprint and above** (750/20/5)

Race Entry Fee: Race 1: Individual Team.....

Race 2: Individual..... Team.....

Race 3: Individual..... Team.....

Total Number of Entrants	Members	Non TA Members	Member Teams	Non TA Member Teams
Race 1: Distance.....	_____	_____	_____	_____
Race 2: Distance.....	_____	_____	_____	_____
Race 3: Distance.....	_____	_____	_____	_____
	A	B	C	D
Number of Entrants for Event	[]	[]	[]	[]
		A +	B + D	
		C		
Total Number of Members / Non TA Members		[]	[]	

Name of race director/promoter

Signature of race director/promoter

Date

TAX INVOICE:

Triathlon QLD LTD – ABN: 11118696481

Triathlon NSW – ABN: 95381380376

Triathlon WA – ABN: 94233007720

Triathlon NT – ABN: 35887758131

Triathlon ACT – ABN: 44330274536

Triathlon SA – ABN: 32180514646

Triathlon VIC – ABN: 87440206536

Triathlon TAS – ABN: 62379894861

Technical Services Fee \$1.65 per entrant or team

Other agreed charges for \$.....

Balance payable to **STTA**** \$

* Excluding HIM, IM and any ATS or National Championship events held in WA

** If the event is part of the Australian Triathlon Series (ATS), Ironman, Half Ironman or National Championships the technical services fee is to be paid to TA and can be remitted with payment of ORMs.

Attachments:

A copy of the results

Incident report addressing any potential insurance claims

Please copy for your records and forward this completed with payment for technical services fee to your STTA** within 14 days of the conduct of the sanctioned event.

TAX INVOICE – TA – ABN 67 007 356 907

- **ORM Individuals (Non TA Member)** 15% of the compulsory or advertised entry fee with a minimum of \$3 and a maximum of \$20 regardless of distance
- **ORM Teams (Non TA Member)** 15% of the compulsory or advertised entry fee with a minimum of \$9 and a maximum of \$20 regardless of distance

For events advertised and registration open prior to 1st July 2007, contact Triathlon Australia for ODM fees

Balance payable to TA:

Please complete this Form and forward to Triathlon Australia within 14 Days of the conduct of the sanctioned event.

Attachments (must be returned to TA within 14 Days of the event):

- Incident report addressing any potential insurance claims (**compulsory**)
- Names AND either addresses OR dates of birth of NON-TA members (**compulsory**)

Please retain a Copy of This Application as a Tax Invoice

Recommendations to come from this event:

Please consider all the above, particularly Unsatisfactory areas.

Consider also whether possibility of local recruitment of Technical Officials will assist in overcoming any shortfall of attendance and whether a Level 1 accreditation course is viable for the STTA Technical Committee to conduct.

1

2

3

4

5

6

7

8

Final Comments:

Add in any final comments here. Delete space below so three (3) blank lines separate the final comments to your name, title and date.

<End of comments>

<insert your name>

Race Director

<insert date of event – eg 20 October 2002>



TRIATHLON
AUSTRALIA

TRIATHLON AUSTRALIA SANCTIONED EVENTS

Medical Director Report

POST-EVENT REPORT

*Where no Medical Director is in attendance the senior medical person shall complete this report

Forward to TA Medical Committee (TAMC) Chair ONLY, copying in the members of your Medical Team for consideration and comment.
 Once the report is APPROVED, the TAMC Chair will forward to TA Office, TAMC, CEO – TA, RD, TAMC Liaison – TA Board, TARDC Chair, TATC Chair and TAEC Chair
 For State sanctioned / run events, forward to RD, STTA, TD. Consult with TAMC member in your State.

Event:
Date:
Location:
Medical Team:
Race Director:

Requirement / Question	✓	✗
Medical Director: _____ Contact number: _____		
No. first aiders:.....		
No. physiotherapists:.....		
No. massage therapists:.....		
Other personnel (describe):		
Medical tent within 25m of finish.		
No. first aiders present on the swim _____, cycle _____, run _____		
Ambulance present.		
Weather conditions Temp: _____ Wind: _____ Humidity: _____		
Communication between medical staff & race organisers? _____ Radio or phone? _____		
Please give details: No. participants treated: No. with Hypothermia: No. with Heat illness: No. hospitalised:		
Other comments:		

<insert your name>, **Medical Director**, <insert date of event – eg 20 October 2002>

e)	Rate the overall content of the race briefing		
----	---	--	--

COMMENTS:

7. Transition:		Satisfactory or "Yes"	Not Satisfactory or "No"
a)	Did Transition open and close at the advertised times?		
b)	Did the design / size present a fair transition for all competitors?		
c)	Were the entry / exit points easily visible to competitors through signage?		
d)	Was the size of the entries / exits sufficient to handle the competitor numbers at peak times?		
e)	Did the Race Director have sufficient race marshalls present to assist in competitor flow?		
f)	Sufficient cycle racks for the competitor numbers		
g)	Did each competitor have a numbered rack position allocated?		
h)	Rate the flow of competitors during the race		
i)	Did the Race Director have security personnel managing Transition at all times?		
j)	Was a secure baggage area provided for competitors?		

COMMENTS:

8. Swim Course:		Satisfactory or "Yes"	Not Satisfactory or "No"
a)	Was the course measured? (describe how in "comments")		
b)	Was actual course distance the same as the advertised distance?		
c)	Was the course layout fair and in accordance with the RCR?		
d)	Rate the number, size, visibility and location of the turning buoys		
e)	Rate the number and location of water safety craft		
f)	Rate the start line / zone (describe below in "comments")		
g)	Swim exit / chute to transition		
h)	Were wetsuits permitted for any competitors? <insert water temperature into either "yes" or "no" column>		
i)	Did the race start at the advertised time(s)?		
j)	Were there wave starts? (describe number, size and time between below in "comments")		

COMMENTS:

9. Cycle Course:		Satisfactory or "Yes"	Not Satisfactory or "No"
a)	Was the course measured? (describe how in "comments")		
b)	Was actual course distance the same as the advertised distance?		
c)	Rate the course design		
d)	Rate the signage, markings on the course		
e)	Rate the traffic management plan in relation to the cycle course		
f)	Rate the presence of marshalls and / or police on the course		
g)	Were there any unsafe areas on the course? (describe below in "comments")		
h)	Were all turn points on the course confirmed as being in the correct position (location)?		
i)	Rate the location and operation of the Mount / Dismount lines		
j)	Were motorcycles available for Technical Officials? <insert number in "yes" column or tick "no" column and explain>		
k)	Did the Race Director have sweep / emergency vehicle(s) on the course?		
l)	Did the Race Director have adequate crowd control?		

COMMENTS:

10. Run Course:	Satisfactory or "Yes"	Not Satisfactory or "No"
a) Was the course measured? (describe how in "comments")		
b) Was actual course distance the same as the advertised distance?		
c) Rate the course design		
d) Rate the signage, markings on the course		
e) Rate the traffic management plan in relation to the run course		
f) Rate the presence of marshalls and / or police on the course		
g) Were there any unsafe areas on the course? (describe below in "comments")		
h) Were all turn points on the course confirmed as being in the correct position (location)?		
i) Was there a lead cyclist?		
j) Were mountain bikes available for Technical Officials? <insert number in "yes" column or tick "no" column and explain>		
k) Did the Race Director have sweep / emergency vehicle(s) on the course?		
l) Did the Race Director have adequate crowd control?		

COMMENTS:

11. Aid Stations:	Satisfactory or "Yes"	Not Satisfactory or "No"
a) Rate the set up		
b) Rate the locations on the course		
c) Were there sufficient aid stations? <insert number in "yes" column or tick "no" column and explain below>		
d) Did aid station personnel wear gloves?		

COMMENTS:

12. Finish-line Area:	Satisfactory or "Yes"	Not Satisfactory or "No"
a) Rate the operation of the Finish-chute / line		
b) Was the Finish-area secure and uncluttered?		
c) Were catchers and medical personnel present?		
d) Was the Race Referee available in the Finish-area?		
e) Was the Penalties Notice Board visible from the Finish-area?		

COMMENTS:

13. Recovery Area:	Satisfactory or "Yes"	Not Satisfactory or "No"
a) Rate the location of the recovery area in the relation to the Finish		
b) Was the area accessible by athletes only?		
c) Rate the availability and quantity of fluids / foods		
d) Was shading available, either by use of tents, buildings, trees or other?		

COMMENTS:

14. Medical:	Satisfactory or "Yes"	Not Satisfactory or "No"
a) Rate the presence of medical resources (detail type and number of personnel below in "comments")		
b) Rate the visibility / security / privacy of the medical area		
c) Were medical personnel in radio contact with other race personnel (including the Race Director and Race Referee)?		
d) Were medical personnel mobile (provided with or supplied their own vehicle) while the event was in progress?		

e)	Was an ambulance stationed on the course?		
f)	Were there supplies of ice available for treating injuries?		
g)	Were any competitors transported to hospital? (detail number and nature of injuries below in "comments")		

COMMENTS:

15. Timing / Results / Post-Race:		Satisfactory or "Yes"	Not Satisfactory or "No"
a)	Type / accuracy / back-up		
b)	Availability of results – speed of calculation		
c)	Presentations		
d)	Were prizes awarded as advertised?		

COMMENTS:

16. Technical / Communications:		Satisfactory or "Yes"	Not Satisfactory or "No"
a)	Were there any disqualifications? (detail below in "comments")		
b)	Rate the Race Director's "treatment" of the technical officials (detail below in "comments")		
c)	Was the Senior Technical Team (STT) provided with radio communications? (detail who linked with below in "comments")		
d)	Rate the overall communications system for the event		
e)	Was there any stakeholder who you consider should have been provided with radio communication? (detail who in "comments")		

COMMENTS:

Recommendations to come from this event:

Above, each section lists very specific (detailed) comments about particular points of the event that were either not satisfactory, or required a comment(s). This serves to highlight to the race organisation, future technical teams, TA and other relevant stakeholders the deficiencies, praise for best practice etc. on the event. At the same time the TA Technical Committee, at the end of each season, use these reports to compile a list of TA Tour / TA National Championships / Half Ironman Qualifier "Recommendations" which TA (and Ironman) can use or consider where appropriate. Based upon specific comments above list below the general recommendations, which act as statements like general sanctioning principles etc, which did not occur at this event. Eight (8) recommendations are listed below, but add or delete any as needed.

- 1
- 2
- 3

Final Comments:

Add in any final comments here. Delete space below so three (3) blank lines separate the final comments to your name, title and date.

<End of comments>

<insert your name>

National Technical Delegate

<insert date of event – eg 20 October 2002>

*For National Events, attach start lists for Elite and Under 23 plus any accident reports or other reports the Senior Technical Team (STT) receives.

INSERT FORM H



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

NOTICE OF POSSIBLE INSURANCE CLAIM

FORM I

The Race Director must disclose any incident that could lead to an insurance claim. Failure to disclose incidents, which are known to the Race Director, could jeopardise insurance arrangements.

Send to: **Triathlon Australia PO Box 6039 Frenchs Forest DC NSW 2086**

1 Event Name: Date Held: / /

Race Director:

Address: Postcode:

Telephone Area Code: (.....) Day: Night: Fax:

Is the Race Director aware of any incident which occurred at the event, which could lead to a personal injury or public liability insurance claim against anyone involved in the event, including a competitor (circle below)?

Yes If 'Yes', please complete Section 2 below. Answer 'Not known' or 'N/K', as required.

No If 'No', please sign Section 3 below.

2 Details of Possible Insurance Claim

Date of Incident: / / Time: :AM/PM Exact/Approximate

Where did the incident occur? (ie. park street suburb):

Name of Possible Claimant:

Address: Postcode:

Telephone Area Code: (.....) Day: Night: Fax:

Type of Person (circle): Competitor Motorist Member of Public Committee Member

Nature of Loss (circle): Bodily Injuries or Damage to: Motor Vehicle Bicycle

Other Property: (please describe)

What happened?

Witness (1) Name: Address: Ph:

Witness (2) Name: Address: Ph:

Authorities in Attendance (circle) Police Ambulance Station:

Name of Officers (if known):

3 Signature Race Director: **Date:** / /

INSERT FORM K



TRIATHLON AUSTRALIA NATIONAL SANCTIONING DOCUMENT

ONE RACE MEMBERS

FORM L

Event Name:
Venue:
Event Date:
Name of Race Director/Promoter:
Phone: **Fax:**
Email:

This FORM lists all known non-TA/STTA members at your event.

The Race Director is to either personally complete the list below, or have those competitors complete the details at registration prior to competing. Forward a copy to the sanctioning STTA and TA within 14 days after the event date.
FORM L must accompany FORM F (Sanctioned Event Invoice) to the STTA & TA. Send by email/disc/CD.

Number	NAME	ADDRESS

Name of race director/promoter	Signature of race director/promoter	Date

Please retain a copy of this Form for your records