



ANNOUNCEMENT

2019 Skate Canada Newfoundland and Labrador ELIZABETH SWAN MEMORIAL SYNCHRO COMPETITION

Host Committee: Flying Blades Skating Club

Date: January 26th, 2019

Location: Eastlink Events Centre, Clarenville, NL

Ice dimensions: 200ft x 85ft

Entry fees:

Teams skating two programs (Elementary – Adult III): \$275 + \$33 per skater (\$25 skater registration fee + \$8 Officials and Technology Development Fee)

Teams skating one program (Beginner I and II) \$125 + \$23 per skater (\$15 skater registration fee + \$8 Officials and Technology Development Fee)

Registration:

All entries should be received by **Wednesday, December 12th** with a cheque payable to Flying Blades SC. Please forward registration to:

Flying Blades Skating Club
15A Blackmore Ave
Clarenville, NL
A5A 1B8

A list of entries and schedule will be posted online at www.skating.nf.ca as soon as possible after the closing date.

Note: Registration will only be accepted from teams registered with Skate Canada for the 2018-2019 season. **Clubs/Team Managers** are responsible to ensure **ALL skaters and teams** are registered with Skate Canada before submitting application forms to the Host Club.

EVENTS TO BE SKATED: As per 2018-2019 SCNL Technical Package

TEAM MERCHANDISE:

Should the Host Committee offer merchandise it will be posted in a second announcement and information will be emailed to clubs and team managers.

RULES:

Please note that the competition will follow the Synchronized Skating Eligibilities as outlined by Skate Canada. Each team is permitted up to a maximum of 4 alternates and all alternates must be registered with Skate Canada. **Please check the Skate Canada Info Centre for updates and changes.**

AWARDS:

The top three placements in each category shall be awarded a prize. In a category where there are less than three entries, the number of prizes shall equal the number of entries.

COACHES:

In order to receive accreditation, all coaches must be registered Professional Coaches in good standing with Skate Canada, for the duration of the event. Coaches must be NCCP Regional Coach In-Training or higher and show proof of being registered as a Professional Coach in "Good Standing" at registration.

TEAM MANAGERS AND CHAPERONES:

All team managers and chaperones must be current Skate Canada registrants. Two coaches, one team manager and two chaperones for a total of five people per team will be accredited. The chaperones will be allowed in the dressing rooms only and will not have access to ice level during practice and competition.

MUSIC:

1. Only CD's are to be used.
2. 2 copies of CD's should be submitted at registration.
3. Each CD shall be clearly identified with:
 - a. Team's name
 - b. Event entered
 - c. Music time

LIABILITY RELEASE:

Skate Canada Newfoundland and Labrador and the Host Committee undertake no responsibility for damages or injuries suffered by skaters. As a condition of and in consideration of their entries in this competition, all competitors and their parents or guardians shall be deemed to agree to assume all risks or injuries to the competitor's person and property resulting from, or caused by, or connected with the conduct and management of the competition, and to release any and all claims they may have against the officials, the organizing committee, the local organizing club and against their officers.

MEDICAL FORMS:

All skaters must have a signed medical waiver. These waivers must be submitted to the Host Committee at on-site registration.

ACCOMMODATIONS:

Skate Canada NL will allocate hotel rooms for all teams. Prior to the competition, teams will be asked to fill out a short survey indicating their hotel requirements and rooms will be assigned accordingly.

CLOSING CEREMONIES:

Will take place immediately following the completion of the competition. Teams that have medalled will take part in the closing ceremonies and will need to have their team banner.

SECOND ANNOUNCEMENT:

The second announcement will be emailed to registered teams and posted online at: www.skating.nf.ca. It will contain information about practice and competition schedules, registration times and other pertinent information (ie: merchandise, photography etc.).

TECHNICAL REQUIREMENTS: Refer to the 2018 - 2019 Synchronized Skating Technical Requirements located on the Skate Canada website.

APPENDICES:

1. Appendix A: **Medical Release Form**. Must be signed by each team member and submitted to the Host Committee at on-site registration.
2. Appendix B: **Team Summary Form**. Completed forms must be submitted with the event registration by **December 12, 2018**.
3. Appendix C- **Planned Program Content Form**. Completed forms must be submitted with the event registration by **December 12, 2018**.
4. Appendix D – **Team Registration Form**.



APPENDIX A

MEDICAL RELEASE FORM

Date: _____

Name of Skater: _____

Team Name and Category: _____

I, _____ admit knowingly and willingly that I have voluntarily enrolled in the **2019 Elizabeth Swan Memorial Synchro Competition** (the “Event”) that includes, but is not limited to, all on-ice and off-ice activities as described in the official event announcements. I am in good health, without injury or illness, and have not been told by any doctor that I may not participate in any physical activity.

In consideration of my entry and of my own free will, I do hereby for myself and my heirs executors and administrators, waive, release, and give up any and all claims, demands, liability, damages, costs and expenses of any kind whatsoever (including personal injury to me or my wrongful death) against **Skate Canada NL and Flying Blades Skating Club** and its instructors, volunteers, employees, agents and any other persons involved in the Event, that may arise from my participation in the Event or while traveling to and from the Event, even if caused in whole or in part by the negligence or other fault of the aforementioned parties or persons. I am aware of and fully understand the inherent and significant risks associated with my participation in the Event. I fully understand that I may injure myself as a result of my participation in the Event and hereby release **Skate Canada NL and Flying Blades Skating Club** and its instructors, volunteers, employees, agents and any other persons involved in the Event from any liability, now or in the future, including but not limited to all physical, mental or emotional illnesses or injuries, however caused, occurring during or after my participation in the Event. I agree that all my participation in the Event, as well as travel to and from the Event shall be at my own risk.

I fully understand that I am forever giving up, in advance, any right to sue or make claims against the parties that I am releasing, if I suffer any injuries or damages, even though I do not know what or how extensive those injuries and damages might be and am voluntarily assuming the risk of such injuries or damages.

I have fully read and understand and agree to this waiver form.

To be signed by athlete and parent/guardian if athlete is under 19 years of age

Athlete Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Witness Signature: _____ Date: _____



APPENDIX B

Synchro Team Summary Form

Category: _____ Team Name: _____

Club: _____

Coach(es): _____

Club Contact Person/ Team Manager: _____

Club Contact Email: _____

Club Contact Phone #: _____

Team Members

Name	Date of Birth	Skate Canada Number

Team Alternates

Name	Date of Birth	Skate Canada Number

***Please return to the Host Club with registration by December 12, 2018.**



APPENDIX C

PLANNED PROGRAM - SYCHRO

Section/ Club:
Category:
Name of Team:

ELEMENTS IN ORDER OF SKATING

Time*	Elements SP

Time*	Elements FS

* Time during program

Date, Signature: _____



APPENDIX D

ELIZABETH SWAN MEMORIAL SYNCHRO COMPETITION

TEAM REGISTRATION FORM

Club Name: _____ Hometown: _____

Team Name: _____

Category Entered: _____

Contact Person: _____ Phone Number: _____

E-mail Address: _____

REGISTRATION FEES:

BEGINNER I and II (1 Program)

Team Registration: \$125.00 \$ _____

Skater Registration: _____ Skaters @ \$ 15.00 = \$ _____

ELEMENTARY – ADULT II (2 Programs)

Team Registration: \$275.00 \$ _____

Skater Registration: _____ Skaters @ \$ 25.00 = \$ _____

Officials & Technology Development Fee

_____ Skaters @ \$8.00 = \$ _____

** If a skater is on more than one team, calculate this fee once.*

Total Enclosed \$ _____

Additional Documents Enclosed:

- Team Summary Form
- Planned Program Content Sheet

Please include a club cheque payable to Flying Blades Skating Club