Gymnastics Ontario is looking for hosts for all qualifying events, selection meets and Ontario Championships in all disciplines for the upcoming competitive season. In an effort to assist clubs in their yearly planning we are striving to have the 2015-2016 Gymnastics Ontario Event Calendar in place by May 1st, 2015.

**NEW for the 2015-2016 Season the Bid to Host and Invitational Sanction Application have been merged into one document. *Please be sure to read and complete all of the necessary information.***

**INSTRUCTIONS - FOR CLUB APPLICANT**

1. Application must be complete for any and all competitions being hosted in Ontario
2. Club applying must be in good standing with Gymnastics Ontario
3. Only FULLY completed applications will be considered or processed
4. In order to be considered, 3 date choices must be submitted
5. All interested clubs are to return the completed **Bid to Host** document by ***April 8th, 2015***.
6. Invitational sanctions may be submitted after April 8th, 2015
7. If you are applying for more than one event, a separate form must be submitted per event
8. Invitations requiring GCG Sanction must be submitted no later than November 15th, 2015
9. Payment (required only for Invitational events only) must be submitted with the application in order for the sanction to be considered complete

The Bid to Host portion of the application is relevant to hosting a Gymnastics Ontario Event (qualifier, cup, selection, Ontario Championships).

If you are applying to host an invitational in conjunction with the Gymnastics Ontario event, you are required to complete all applicable sections. The Invitational information must accompany the Gymnastics Ontario event information.

If your club chooses to host an invitational event only, the completed document may be submitted any time after April 8th, 2015. At that time ***completed*** applications will be considered on a first come, first served basis.

Bid and Invitational applications must be submitted electronically to the applicable Program Manager as follows:

Acrobatics acro@gymnasticsontario.ca
Gym for All/Demo events@gymnasticsontario.ca
Men’s Artistic mag@gymnasticsontario.ca
Rhythmic rhythmic@gymnasticsontario.ca
Trampoline and Tumbling tnt@gymnasticsontario.ca
Women’s Artistic wag@gymnasticsontario.ca

BID TO HOST/INVITATIONAL SANCTION APPLICATION

**Section A: Host Club**

|  |
| --- |
| **HOST CLUB INFORMATION(to be posted on the GO website and Call to Meet)** |
| NAME |  |
| ADDRESS |  |
| PHONE |  |
| MEET DIRECTOR (S) |  |
| EMAIL |  |
|  |
| NAME OF VENUE (if different from host club): |  |
| ADDRESS (if different from host club): |  |
| CITY(if different from host club): |  |
| POSTAL CODE (if different from host club): |  |
| PHONE (if different) (for posting on GO website): |  |
| EMAIL (if different) (for posting on GO website): |  |

**Section B: Event Selection**

**DISCIPLINE APPLYING TO HOST (check all that apply)**WAG [ ]  MAG [ ]  TRA [ ]  TUM [ ]  RG [ ]
ACRO [ ]  AER [ ]  ODP [ ]  GG [ ]
  **TYPE OF EVENT APPLYING TO HOST (check all that apply)**

Gymnastics Ontario Event [ ]
Invitational Event [ ]
Recreational/Demo Event [ ]

 **EVENTS APPLYING TO HOST (indicate with 1, 2 or 3 as your 1st, 2nd and 3rd choices for hosting)**

|  |
| --- |
| **WAG LEVEL 6-10 OPTIONAL EVENTS** |
| Event | Date | Indicate 1st, 2nd, 3rd choice |
| Team Ontario Selection/Screening #1\* | November 13th-15th, 2015 |  |
| Qualifier #1 | November 21st-22nd,2015 |  |
| Qualifier #2 | November 21st-22nd, 2015 |  |
| Qualifier #3 | November 28th-29th, 2015 |  |
| Qualifier #4 | December 5th-6th, 2015 |  |
| Qualifier #5/Screening #2\* | December 5th-6th, 2015 |  |
| Qualifier #6 | January 23rd-24th, 2016 |  |
| Qualifier #7 | January 23rd-24th, 2016 |  |
| Qualifier #8 | January 30th-31st, 2016 |  |
| Qualifier #9 | February 6th-7th, 2015 |  |
| Qualifier #10 | February 13th-14th, 2016 |  |
| Qualifier #11/Qualifier #12 | February 20th-21st, 2016 |  |
| Qualifier #13/Qualifier #14 | February 27th-28th, 2016 |  |
| Qualifier #15 | March 5th-6th, 2016 |  |
| Ontario Championships\*\* | April 8th-10th, 2016  |  |

\*indicates where National competitions would like to be (pending confirmation from GCG).
\*\*an external venue is required for WAG Level 6-10 Ontario Championships

|  |
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| **WAG 3-5 LEVEL COMPULSORY EVENTS** |
| Date | Indicate 1st, 2nd, 3rd choice |
| January 30th-31st, 2016 |  |
| February 6th-7th, 2016 |  |
| February 13th-14th, 2016 |  |
| February 20th-21st, 2016 |  |
| February 27th-28th, 2016 |  |
| March 5th-6th, 2016 |  |
| March 12th-13th, 2016 |  |
| April 16th-17th, 2016 |  |
| April 23rd-24th, 2016 |  |
| April 30th-May 1st, 2016 |  |
| May 7th-8th, 2016 |  |
| May 14th-15th, 2016 |  |
| June 3rd-5th, 2016 ONTARIO CHAMPIONSHIPS |  |

Please note the following guidelines for all WAG OCP Compulsory Qualifiers:

* OCP 3-5 Compulsory Qualifiers will be a one or 2-day competition.
* If awards are held in a separate area the maximum number of athletes for a 1-day event is 148.
* If awards are held in a separate are the maximum number of athletes for a 2-day event is 296.
* If awards are held in the competition area the maximum number of athletes for a 1-day event is 128.
* If awards are held in the competition area the maximum number of athletes for a 2-day event is 256.

|  |
| --- |
| **MAG** |
| Event | Date | Indicate 1st, 2nd, 3rd choice |
| 1st Cup & Team Ontario Selection | December 11th-13th, 2015 |  |
| 2nd Cup | February 5th-7th, 2016 |  |
| 3rd Cup | March 4th-6th, 2016 |  |
| Ontario Championships | April 8th-10th, 2016 |  |

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| **T&T** |
| Event | Date | Indicate 1st, 2nd, 3rd choice |
| 1st Cup (all levels) | December 4th-6th, 2015 |  |
| 2nd Cup (all levels) | January 29th-31st, 2016 |  |
| 3rd Cup (all levels) | March 4th-6th, 2016 |  |
| Ontario Championships (levels 1-4 only) | April 8th-10th, 2016 |  |

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| --- |
| **RG** |
| Event | Date | Indicate 1st, 2nd, 3rd choice |
| Elite Ontario | March 5th-6th, 2016  |  |
| Qualifier #1 | April 1st-3rd, 2016 |  |
| Qualifier #2 | May 6th-8th, 2016  |  |
| Ontario Championships | June 10th-12th, 2016  |  |

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| **ACRO** |
| Event | Date | Indicate 1st, 2nd, 3rd choice |
| Ontario Cup #1 | January 30th-31st, 2016 (tentative) |  |
| Ontario Cup #2 | March 5th-6st, 2016 (tentative) |  |
| Ontario Cup #3 | April 9th-10th, 2016 (tentative) |  |
| Ontario Championships | May 7th-8th, 2016 (tentative) |  |

**Section C: Invitational Information**

|  |  |
| --- | --- |
| Name of Event: |  |
| Name of Venue (if different from host club): |  |
| Street Address (if different from host club): |  |
| City (if different from host club): |  |
| Postal Code (if different from host club): |  |
| Telephone # (for posting on GO website): |  |
| Email (for posting on GO website): |  |
|  |
| Requested Date for Event: | 1st Choice: |
| 2nd Choice: |
| 3rd Choice: |
| Participating Levels: |  |
| Participating ages: |  |
| How many sets of equipment will you be using? |  |
| What competition format will be used?(Note: any competition format being used that differs from what is stated in the Technical Rules and Regulations needs to be outlined and submitted for approval as part of application) |  |
| How many panels of judges will be needed? |  |
| Name of Competition Chief/Head Judge: |  |
| Are you requesting usage of the GO scoring program? |  |
|  |
| Do you intend to host clubs from outside of Canada? | Yes or No |
| If yes, please fill out and attach the GCG Form H found on the GO website under forms. |

**Section D: Facility**

|  |
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| **FLOOR PLAN** |
| All applications **must** attach a proposed floor plan which includes placement of judge’s tables, scoring, announcer and all other equipment on the competition floor. Clubs renting a venue must provide a copy of their signed agreement with this application to be considered. |
| We plan to host in our own facility  | Yes or No |
| We plan to rent a facility  | Yes or No (name and venue address above) |
| We will be using the same floor plan as the previous season | Yes or No |
| Floor plan is attached | Yes or No |
| Square footage of facility |  |
| Ceiling height before obstructions (lights, beams, etc.) |  |
| Note any unique characteristics of the gym (i.e. close to wall) |  |
| Overall capacity based on Ontario Fire Code |  |
| Number of Fire Exits |  |
| **EXTERNAL AREAS** |
| Number of parking spaces |  |
| Distance of parking spaces to facility |  |
| Number of spectator seats |  |
| Type of spectator seating (bleachers or chairs) |  |
| Number of washrooms for women |  |
| Number of washrooms for men |  |
| Number of washrooms for athletes/coaches/judges (if different from above) |  |
| Number of change rooms for females |  |
| Number of change rooms for males |  |
| **ADDITIONAL AREAS** |
| Size and location of athlete/coach registration area |  |
| Size and location of spectator admission area |  |
| Size and location of food concession area |  |
| Size and location of vendor area |  |
| Size of separate awards area |  |
| Judges’ meeting/dining room size |  |

**Section E: Organizing Committee**

|  |
| --- |
| **ORGANIZING COMMITTEE INFORMATION** |
| Meet Director |  |
| Alternate phone number? |  |
| Has the Meet Director attended the GO Meet Director’s Course? | Yes or No |
| Number of years/events as a Meet Director: |  |
| Date and name of last event hosted: |  |
| Additional Organizing Committee Members: |  |

|  |
| --- |
| **ORGANIZING COMMITTEE EXPERIENCE** |
| Name | Event | Date of Event | Level of Event | Role |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **CHIEF SCORER EXPERIENCE** |
| Name | Event | Date of Event | Level of Event | Role |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Has the Scorer used Beyond the Scores (MAG/WAG) at a competition? | Yes, No or N/A |
| Has the Scorer used ISS Meet Management Suite (T&T) at a competition? | Yes, No or N/A |
| Has the Scorer used the Score2U (RG) program at a competition? | Yes, No or N/A |
| If yes, at which competition? |  |

**Section F: Medical**

Medical Services, as per Gymnastics Ontario policy, are to be available during the entire warm-up and competition. Please see “Section D: Safety Guidelines” from the “Technical Rules & Regulations” for further information.

Please note: St. John’s Ambulance may only be used for the care of spectators.

The minimum requirement for medical personnel on-site during a competition is a certified First Responder.

At least one of the following must be on site, please include name and phone number;

|  |  |  |
| --- | --- | --- |
| Position | Name | Phone # |
| Medical Doctor |  |  |
| Nurse |  |  |
| EMT |  |  |
| Physiotherapist |  |  |
| Athletic/Sports Therapist |  |  |
| Other: |  |  |

 **Section G: Equipment**

|  |
| --- |
| **EQUIPMENT INFORMATION** |
| Will you be using your own equipment or renting? |  |
| Who is the equipment manufacturer? |  |
| Required checklist of discipline specific equipment is attached (see appendix) | Yes or No |

 **Section H: Hotel Information**

|  |
| --- |
| **HOTEL INFORMATION** |
| Name of hotel: |  |
| Address: |  |
| Phone # and/or website: |  |
| Room rate: |  |
|  |
| Name of hotel: |  |
| Address: |  |
| Phone # and/or website: |  |
| Room rate: |  |

Please attach map or link of the venue area with proximity to hotels marked.

**Section I: Payment & Signature**

**Payment (required for invitational/demo/recreational events only)**

**Required Fees:**
Two separate payments must be made – one to Gymnastics Ontario for your GO Sanction Fee and one to Gymnastics Canada for your GCG Sanction Fee if you are choosing to host an event that will bring participants from outside of Canada. These fees cover basic FIG license fees and administrative expenses.

|  |  |
| --- | --- |
| **Type of Event** | **Fee** |
| Gymnastics Ontario Invitational | $50+HST per calendar day of competition **($50+$6.50=$56.50/day)** |
| International Invitational | Fees are in addition to the GO required fee above and are paid to Gymnastics Canada (see GCG Form H for fee breakdown) |

|  |
| --- |
| **Gymnastics Ontario Payment** |
| Gymnastics Ontario Invitational | # of Days of Event x $56.50 per day | Total: |
|  | HST# 12212 5131 RT 0001 |  |

|  |
| --- |
| Cheque #: |
| Credit Card #: | CSV:  | Exp. Date:  |
| Name of Card:  | CC Type: |

*\*Amex not accepted*

**Signature (for all bids & applications):**

**In submitting and signing this request for participant sanction, the club/affiliation’s individual or group sanctioned agrees to abide by the rules and regulations of Gymnastics Ontario, Gymnastics Canada and FIG. The club/affiliated individual or group also stands by the information in this document as to being true and correct.**

**Signature of Organizing Committee Chair/Meet Director:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For G.O. Office Use**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date Received | Invitational Sanction Request: Granted | ❑  | Denied | ❑ |  |
| Program Manager Signature: | Date: |
| Event Director Signature: | Date: |