Creating a world class athlete experience is a priority for Triathlon BC, both to ensure growth for our sport, and, with a saturated event market place, ensure athletes return, time and time again, to the sport we love.

'Sanctioned by Triathlon BC' indicates that an event has met the minimum requirements established by Triathlon BC. It signifies that the Race Director has completed a thorough review of an event's swim, bike and run courses, has evaluated and planned for medical, emergency, safety and volunteer support, and that the Race Director will conduct the event according to the rules and regulations governed by the International Triathlon Union (ITU), Triathlon Canada and/or Triathlon BC. Sanctioned events have continuous technical support and professional guidance and advice where required.

Events sanctioned by Triathlon BC have the following goals:
• Safe and fair competition.
• Strong partnership between the LOC and Triathlon BC.
• Inclusion of paratriathlon events to support participation and growth of paratriathlon in the province.
• Inclusion of age-group competition from kids to adult to grow multisport across the province.
• Development of the sport and maximize exposure for triathlon.
• Provide competitive opportunities that support long-term athlete development.
• Encourage performance stream athletes to remain in the province to experience formidable competition.

To host a Triathlon BC sanctioned event, all outstanding fees must be resolved prior to submitting an event bid.

- Events that do not have a recent* Triathlon BC sanction history are required to submit a letter of endorsement, issued by the host municipality they wish to run an event in. Each letter must indicate the name of the organizer, proposed date and location of the event, and be signed by the permit issuing department of the host community. A letter of endorsement must accompany each Race Bid (*5 or more years).

- Additionally, at the discretion of the Triathlon BC Board, a refundable deposit of up to $2,500.00 may be requested to ensure sanctioning procedures are followed.

*Please check all information for accuracy, the information supplied below will appear on the Triathlon BC website.

RACE NAME: _________________________________ EVENT DATE: __________________
RACE LOCATION: ______________________________
EVENT WEBSITE: ______________________________ EMAIL: __________________
RACE DIRECTOR: ______________________________ PHONE: (_____) ___________
MAILING ADDRESS: ______________________________
CITY: ______________________________ POSTAL CODE: ________________
SOCIAL MEDIA CHANNELS
TWITTER: ______________________________ INSTAGRAM: ______________________________
RACE DISTANCE(S): KOS SPRINT STANDARD LONG DISTANCE CROSS OTHER
(circle applicable)

ADDITIONAL DETAILS/DISTANCES IF NECESSARY:

SWIM (POOL/OCEAN/LAKE): __________________ BIKE: __________________

RUN: __________________ OTHER: __________________

To help develop the sport, would you be interesting in partnering with Triathlon BC in hosting a:

☐ Adult Clinic ☐ Coach Clinic ☐ Kids/Schools Clinic

If you have indicated YES to the above, please provide contact details that we can work with in delivering a clinic to your event community.

NAME: ______________________________________ PHONE: (_____) _______________________

NEW: To expedite the sanction process, and to expedite planning and assignment of Officials, complete sanction packages, including detailed course maps and transition areas, must be submitted by May 1st, 2018.

As the Race Director, I hereby agree and acknowledge our agreement to the terms and conditions listed above, dated this _________ day of __________________, 2017.

__________________________________________________________
Event Authorized Signatory

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PLEASE NOTE: $150 EVENT SANCTION DEPOSIT MUST ACCOMPANY EACH EVENT APPLICATION. PLEASE INCLUDE PAYMENT WITH EACH EVENT SUBMISSION.

PAYMENT INFORMATION

CHEQUE ENCLOSED
(please circle)
YES NO IF ATTACHED, AMOUNT OF CHEQUE: $_____________

CREDIT CARD PAYMENT
(please circle)
YES NO CREDIT CARD INFORMATION: VISA MASTERCARD
(please circle)

CREDIT CARD NUMBER: ________________________________

EXPIRY DATE: __________ NAME AS IT APPEARS ON CREDIT CARD: ________________________________

AMOUNT TO BE CHARGED: $_________________ SIGNATURE: _________________________________