

## Burnaby Interclub Bill Copeland Sports Centre, Burnaby, BC January 13, 2018



Location	Bill Copeland Sports Centre, 3676 Kensington Avenue, Burnaby, BC V5B 4Z6		
Sanction	BCSSA Sanctioned		
Entry Fee	\$40 Includes \$2 Officials Development Fee (\$10 for Active Start) Please one cheque per club, payable to Burnaby Haida Speed Skating Club		
Entry Deadline	Email Club Summary sheets to <a href="mailto:bbyspeedskating@gmail.com">bbyspeedskating@gmail.com</a> by 11:00 pm, Friday, December 29, 2017. (Late entries will not be accepted). Early submission encouraged and appreciated		
Format	All-day Ability		
Eligibility	Open to all Provincial and Regional Stream skaters from Active Start to C4L.		
Mats	Level 2 Protection		
Schedule	7:00 a.m. Coaches and officials meeting, Lakeview Room 7:00 a.m. – 7:30 a.m. Warm Up (see posted schedule for groups) 7:45 a.m. – 5:30 p.m. Racing 12:00 p.m. – 12:45 p.m. (approx) Lunch Active Start will skate as close to noon as possible. Plan to arrive at 11:00 a.m.		
Skater Equipment	All skaters are required to wear equipment as outlined by SSC Procedures and Regulations D3-100. All skaters are required to wear shatter resistant protective sport glasses (clear or yellow are recommended) or a complete visor. Glasses must be held in place by an elastic strap. Skaters helmets must conform to SSC Rule D-3, <i>No bicycle helmets are allowed</i> . Helmets must be CSA approved and must be securely fastened under the chin. Skate Tip Blade Safety: ends must be rounded off with min. of 10 mm. radius in accordance with ISU rule 291.		
Helmet Covers	Helmet covers will be supplied for this event. Each club coach is responsible for distributing and collecting the helmet covers.		
Awards	Ribbons to top six in each race		
Inquiries	Burnaby Speed Skating Club,bbyspeedskating@gmail.com		

Burnaby Speed Skating would like to acknowledge funding from the British Columbia Gaming Commission that helps to support speed skating in our community.





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Skater Name (last, first)	Male	remaie	
Mailing Address  Date of Birth (DD – MM – Y		h (DD – MM – YY)	
Club	Age as of Ji	Age as of June 30, 2017	
Health Care #	MMS#		
Emergency Contact	Telephone	Telephone	
Any special/current medical conditions we should be	aware of?		
Please provide seed times on club entry spreadsheet			
In consideration of your accepting this entry, I hereby, for and release any and all rights and claims for damages I in Columbia Speed Skating Association and its member club Burnaby Haida Speed Skating Association, the City of Bu contest to be held <b>January 13, 2018</b> at the Bill Copeland release I acknowledge the potential for injury. In witness in,2017.	nay have against Speed Skating ( bs, their agents, officers or memb irnaby, and our sponsors for any i Sports Centre in Burnaby, British	Canada and the British pers, including medical staff, the injuries suffered by me at said a Columbia. In signing this	
This information is collected under the authority of the Fre to register you in the competition. Financial information w competitions/events requires that names will appear on participants may be published on boards, websites, media about the collection of or use of this information, contact to	ill be used to process payment. Co osted race lists and results print on a, newsletters and promotional m	Organization of outs. Names/Images of naterial. If you have questions	
I have read and agree to the BCSSA Concussion Proto	,	se initial)	
(The BCSSA Concussion Protocol can be found on the BCSSA Safety	webpage)		
Skater's Signature			
Parent/Guardian if skater is under 19 years of age			