

# Gymnastics Canada

## Authorization to Host - Activity

### REQUEST TO HOST AN INTERNATIONAL ACTIVITY IN CANADA

#### INSTRUCTIONS - CLUBS

1. An authorization form must be completed for **ALL INTERNATIONAL ACTIVITIES**<sup>1</sup> that will occur **IN** Canada.
  - a. Activities include, but are not limited to training camps, clinics, and courses which include participants and/or clinicians from a foreign country.
  - b. Please see the **Authorization to Host – Competition** to apply to host a competition with international participation.
2. The form must be **typed**.
3. Along with this form you must submit:
  - a. Official information (flyer, information/registration package, etc.) for the Activity.
  - b. For training camps opened for international participation - A typed list of country/ies to be invited - See Appendix A.
  - c. Payment Form – Appendix B. Note that only credit card payments are accepted.

**An incomplete form, or an application missing documents, will be considered incomplete and therefore will NOT be processed until all necessary information, documents and payment are provided.**

4. An Authorization fee is applicable to all such requests. The Payment Form, along with the Authorization form must be sent to your respective [Provincial / Territorial Federation / Association \(PTO\)](#) for approval and signature. Please view the following table for authorization fees. Select the one that applies to your request:

Check	Type of Events	Fee
<input type="checkbox"/>	Activities including international clinicians/course conductors, not open to international participation.	\$50
<input type="checkbox"/>	Single country club training camp	\$100
<input type="checkbox"/>	Multiple county club training camp	\$150

5. GCG must receive all authorization to host an activity requests no later than 60 days prior to the first day of the activity. Requests received after the deadline may be processed at GCG’s discretion in which case a non-refundable late handling fee of \$100 will be applied.

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<sup>1</sup> At no time will a Canadian club or PTO invite a foreign National Federation or club directly. The International Protocol dictates that GCG, as the National Federation, **MUST** be the one to send the official invitation to the requested countries.

6. GCG will process **complete applications** within 3 weeks of reception from the PTO. GCG will only start processing a request once it is considered complete which means that the authorization form is properly completed and all mandatory auxiliary documentations, as listed under the Clubs Instructions section, have been received.
7. Approved activities will be featured on [GCG's approved event calendar](#), invitations will be sent to foreign national federation indicated in Appendix A (if applicable), and Visa letters will be provided (if applicable).

**A club/group hosting an international activity without GCG's approval, or without following procedure, will first receive a written warning from GCG. Clubs/groups will be fined \$500 for any additional non-compliance activities thereafter and risk receiving a bad standing status with GCG.**

## **INSTRUCTIONS – PTO's**

1. Upon reception of the form from a club, the PTO must evaluate, approve and sign the request. A PTO may choose to deny an application in which case it will not be considered by GCG.
2. The Authorization Form, Payment Form as well as all other documents are to be submitted to GCG's Events and Marketing Director – Mylaine Doré at [mdore@gymcan.org](mailto:mdore@gymcan.org).
3. GCG must receive all authorization to host an activity requests no later than 60 days prior to the first day of the activity. Requests received after the deadline may be processed at GCG's discretion in which case a non-refundable late handling fee of \$100 will be applied.
4. GCG will process **complete applications** within 3 weeks of reception from the PTO. GCG will only start processing a request once it is considered complete. I.e. the authorization form is properly completed and all mandatory auxiliary documentations, as listed under the Clubs Instructions, has been received.

## Gymnastics Canada

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### 1. Discipline

- |  |  |
|--|--|
| <input type="checkbox"/> Aerobic Gymnastics        | <input type="checkbox"/> Rhythmic Gymnastics         |
| <input type="checkbox"/> Acrobatic Gymnastics      | <input type="checkbox"/> Trampoline Gymnastics       |
| <input type="checkbox"/> Gymnastics for All        | <input type="checkbox"/> Women's Artistic Gymnastics |
| <input type="checkbox"/> Men's Artistic Gymnastics |  |

2. <u>Host Club Information</u>		
<b>Name of Host Club</b>	<b>Contact Person</b>	
<b>Address</b>		
<b>City</b>	<b>Province</b>	<b>Postal Code</b>
<b>Telephone</b>	<b>Email</b>	
<b>Name of Organizer:</b>		
<b>Name of Head Coaches/Clinicians/Facilitators and their national federation affiliation if non-Canadian:</b>		

3. <u>Event/Activity Information</u>	
<b>Name of the Activity</b>	
<b>Venue of the Activity</b>	
<b>Type of Activity (clinic, course, training camp, etc.):</b>	
<b>Beginning date (DD/MM/YYYY)</b>	<b>Ending Date (DD/MM/YYYY)</b>
<b>Number of countries invited (if applicable):</b>	
<b>Number of international participants expected (if applicable):</b>	

<b>Athletes:</b>	<b>Coaches:</b>	<b>Judges:</b>	<b>Clinician/course conductor:</b>
<b>Will there be a medical team present during all activity days?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO			

<b>4. <u>Invitations</u></b>		
<b>Would you like the invitation to be sent to specific countries?</b> (if yes, please attach a list of countries you wish to invite – Appendix A)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Will foreign national team athletes be invited?</b> <small>NOTE: GCG has the right to refuse the participation of foreign national team members.</small>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Would you like to invite Canadian National Team Members?</b> (if yes, please indicate which National Team Athlete you would like to invite in the space below )	<input type="checkbox"/> YES	<input type="checkbox"/> NO

### ACKNOWLEDGEMENTS

A GCG Authorization to host an activity in Canada does not provide GCG insurance coverage – liability and sport accident. Clubs / participants must ensure that they are covered by their Provincial federation insurance and/or have their own event liability insurance. Provincial liability will respond in the case of an injury / accident.

Organizing committees must ensure that all foreign national participants have proper travel, medical and accident insurance before allowing them to participate.

By signing this form the organizing committee attests that all members of the organizing committee have completed the Respect in Sport training as well as hold a valid Canada-wide Police Check. It is highly recommended that all volunteers involved in the organization of the activity also hold a valid Canada-wide Police Check.

The club further attests that it has in place specific policies relating to the conduct of organizers, volunteers, coaches, managers and/or parents attending its activities and that any non-Canadian Clinician/Facilitator will always be accompanied by an organizer with a valid Canada-wide police check when in the presence of under-aged and/or vulnerable participants.

In making this request for approval, the club/affiliation’s individual or group approved agrees to abide by the rules and regulations of the FIG and of Gymnastics Canada.

Signature: \_\_\_\_\_  
 President – Organizing Committee

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_  
 PTO President and/or CEO

**For GCG office use**

Date Received	Request Status
Notes	
Program Director Approval	Date
Event Department Approval	Date
Payment Received YES / NO	Late Penalty Applied YES / NO



## APPENDIX B - PAYMENT FORM

Payment is only accepted by credit card. Please complete the information below or call in your credit card information at 613-748-5637 ext. 239.

Method of Payment	Name of Card Holder	Credit Card #	Expiry Date
VISA			
Master Card			

Proof of payment will be sent via e-mail. Please provide an e-mail address:

\_\_\_\_\_

I, \_\_\_\_\_ (*name of card holder*), authorize Gymnastics Canada to charge the amount of \_\_\_\_\_ to my credit card in payment of the attached Authorization Request Form.