

# EXTERNAL TRAINING APPLICATION SUMMER 2011

Deadline May 15th, 2011

**Contact:**

**Trisha Drake**, Supervisor, Sports

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*All information collected will be used for internal purposes only.*

## 1. CONTACT INFORMATION

Team/ Club Name: \_\_\_\_\_

Main Contact Name: \_\_\_\_\_

Contact Position/Title: \_\_\_\_\_

Organization Mailing Address: \_\_\_\_\_

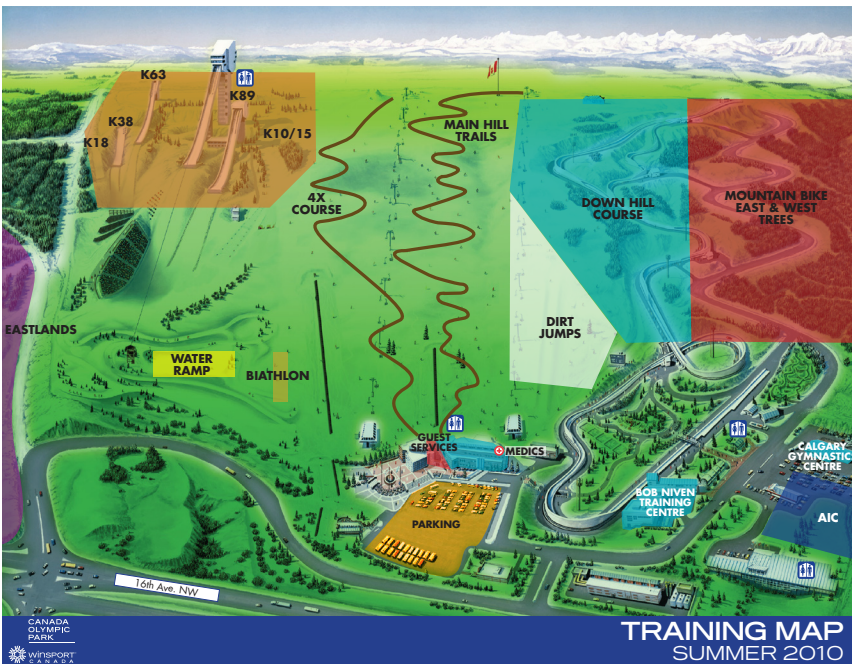
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number (Business): \_\_\_\_\_ (Home) and/or (Cell) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

## 2. VENUE REQUEST



*Please indicate training venues required:*

- Water Ramp
- East & West Trees
- Main Hill
- Eastlands
- Dirt Jumps/Downhill Course
- 4X Course
- Ski Jumps
- Biathlon Range
- Other: \_\_\_\_\_

Regular training commences in June ~ weather dependent.

### 3. CURRENT TEAM MEMBERS

Coach Name/Position	Coach Contact Info: Phone # and Email:	ATHLETE LIST
<i>Please send updated list if there are modifications</i>		
1. Name:	Coach Phone #: _____	<ol style="list-style-type: none"> <li>1. Attach list(s):</li> <li>2. File formats: xls, doc, pdf</li> </ol>
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
2. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
3. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
4. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
5. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
6. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
7. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	
8. Name:	Coach Phone #: _____	
Position:	Coach Email: _____ <input type="checkbox"/> Please add to club distribution list for weekly training updates	

## 4. CLUB PROGRAMS

Training times are available between **09:30 -20:45** to allow Hill Patrol to set up and do final sweeps within operating hours.

<b>Program Name:</b> _____ <b>Coach:</b> _____ <b>Training Venue:</b> _____ <b>Program Time:</b> <input type="checkbox"/> 09:30-12:00 <input type="checkbox"/> 12:00-16:00 <input type="checkbox"/> 16:00-18:00 <input type="checkbox"/> 18:30-20:45 (Ski Jumping: <input type="checkbox"/> 09:00-11:00 <input type="checkbox"/> 15:30-17:00 <input type="checkbox"/> 18:30- 20:00) <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Saturday	<b>NUMBER OF ATHLETES:</b>  _____
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## 5.0 TRAINING INFORMATION

TYPE	GUIDELINES	RATES
EVENTS	Availability determined by event schedule & Holiday programming. Subject to approval based on venue.	<b>Training Fee</b> \$500.00/season
WEEKENDS		<b>Summer Season Passes</b> <b>Please visit</b> <a href="http://www.winsportcanada.ca/cop/ticketspasses/seasons_passes.cfm">www.winsportcanada.ca/cop/ticketspasses/seasons_passes.cfm</a>

All summer events are managed through the special events department. Events may restrict training schedules.

## 6. TRAINING REQUIREMENTS

a) Does your club require an on hill club equipment storage bin for the summer season?  Yes  No

b) Will your club require athlete lockers for the summer season?  Yes  No

c) Club/Team Vehicles parked onsite:

Vehicle Description: \_\_\_\_\_

Vehicle License Plate: \_\_\_\_\_

## 7. INVOICING INFORMATION

Treasurer/Invoicing Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Credit Card Number – *Please phone in number to Trisha Drake at (403) 247-5461*

Send Receipt:  Mail  Email

***Cheques payable to: Calgary Olympic Development Association***

## 8. ATTACHMENTS

All sections of the application are complete

Coach and athlete lists are provided

Certificate of Incorporation if your club has not submitted one previously

Certificate of insurance provided

I agree and acknowledge all items covered in the training policies and procedures