

Saskatchewan Athletics  
2020 College Drive  
Saskatoon, SK S7N 2W4  
306-664-6744 (p)  
306-664-6761 (f)  
[athletics@sasktel.net](mailto:athletics@sasktel.net)  
[www.saskathletics.ca](http://www.saskathletics.ca)

## **CONDITIONS FOR SANCTION OF OFF TRACK EVENTS**

### **PLEASE NOTE:**

**The Race Director must be a current paid member of Saskatchewan Athletics**

### **Criteria to be met prior to event:**

1. Application for Saskatchewan Athletics Sanction of all off track events must be made **30 days prior** to the event. A Late Fee of \$50 will be charged at the time of payment if the 30 days prior is not met.
2. An Application Fee of \$15 will be charged to a current Sask Athletics member or club. If the event is hosted by a non-member/club there will be a \$30 Application Fee. If Sask Athletics liability insurance is not required there will be an additional \$50 insurance waiver fee. Proof of Equivalent Liability Insurance must be provided at the time of application. The attached Waiver form must be completed.
3. Display Saskatchewan Athletics banner at the event.
4. It is the responsibility of the Race Director to ensure Medical Personnel or a person certified in first aid is available at all times during the event.

### **Criteria to be met after event:**

1. A list of officials and Tech Aids working at the event must be submitted **within 3 days after the event**.
2. Results of the event must be submitted **within 3 days after the event** to the office.
3. Sanction fees must be paid **within 5 days after the event** to the office.



Saskatchewan Athletics  
2020 College Drive  
Saskatoon, SK S7N 2W4  
306-664-6744 (p)/306-664-6761 (f)  
[athletics@sasktel.net](mailto:athletics@sasktel.net)  
[www.saskathletics.ca](http://www.saskathletics.ca)

MEET SANCTION APPLICATION FORM  
OFF TRACK  
**TO BE COMPLETED, RETURNED & APPROVED  
30 DAYS PRIOR TO THE EVENT**

1. Name of Club Requesting Sanction; \_\_\_\_\_

2. Race Director; \_\_\_\_\_ SA# \_\_\_\_\_

Address; \_\_\_\_\_ P/C \_\_\_\_\_

Phone; \_\_\_\_\_ Email \_\_\_\_\_

3. Name of Race; \_\_\_\_\_

Proposed Date; \_\_\_\_\_ Alternate date; \_\_\_\_\_

Start time; \_\_\_\_\_ Location; \_\_\_\_\_ Race Site; \_\_\_\_\_

Is this a previously accredited course? [  ] Yes [  ] No

If Yes, Name course accreditor & approximate date of course accreditation

Course Accreditor \_\_\_\_\_ Date of course accreditation \_\_\_\_\_

If No, have you applied for course accreditation to the course accreditor, **AT LEAST ONE MONTH PRIOR TO THE MEET**? [  ] Yes [  ] No

Schedule and distance to be run (attached copy of race brochure) \_\_\_\_\_

Running surface \_\_\_\_\_

Course Format;

- Out & Back
- Point to Point
- Lap
- Circuit

Is route free of obstructions and hazards?  Yes  No

Will traffic be controlled or restricted?  Yes  No

Give details (including Police Department involvement) \_\_\_\_\_

---

---

---

Categories

Male

Female

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of Awards and Number of Awards;

---

---

---

---

Upon acceptance of the sanctioning of this event, I agree to abide by the rules and procedures of Athletics Canada and Saskatchewan Athletics.

\_\_\_\_\_  
Signature

**Sask Athletics Alternative Liability Insurance  
Waiver and Indemnification for SK Athletics Sanctioned Events**

(Insert Event Organizer or Owner's Name) \_\_\_\_\_ has chosen to waive the General Liability Insurance provided by Sask Athletics (SA) in conjunction with the

\_\_\_\_\_ (the "Event"),

A SA sanctioned event which will take place on \_\_\_\_\_ (date(s)). We agree to carry General Liability Insurance coverage which names SA and its officers and directors, members, agents, employees, and volunteers (collectively referred to as 'SA Personnel') as additional insured's and provide a Certificate of Insurance evidencing such coverage. Please refer to the Alternative Liability Insurance Checklist for required coverage for SK Athletics sanctioned events.

\_\_\_\_\_ (organizer) shall indemnify, hold harmless, assume liability for, and defend SA, and its Personnel from any and all damages, awards, costs and expenses including, but not limited to, legal fees, court costs, and all other sums which SA and its Personnel may pay or become obligated to pay on account of any and every demand, claim or assertion of liability, or any claim or action founded thereon, connected to or arising or alleged to have arisen out of the Event as sanctioned by SA, on \_\_\_\_\_ (date(s)) or by any action or omission by (insert organizer, event owner's name)

its members, agents, employees, volunteers, directors or officers in relation to the sanctioned event.

**To be signed by** one (1) Director/Officer of the Hosting Organization, Event Owner, Club, Corporation or Partnership. A Sole Proprietorship Event – **must be witnessed on the signature line**. Alternatively by one (1) Member of the Host Organizing Committee should a Board of Directors/Officers not be part of the event ownership structure.

I further certify that I am authorized to sign this waiver on behalf of:

(club, organization, event owner's name)

Signature:

Print name:

Title:

Address:

\_\_\_\_\_ City: \_\_\_\_\_

Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Ph. Res (\_\_\_\_)- \_\_\_\_\_ Ph. Bus (\_\_\_\_) – \_\_\_\_\_

Email:

Date:

**Complete and return to: Sask Athletics, 2020 College Drive, Saskatoon, SK S7N 2W4  
664-6744 or [athletics@sasktel.net](mailto:athletics@sasktel.net)**

**Sask Athletics Office Use Only:** Signature of Authorized Sask Athletics Management: \_\_\_\_\_

Liability Insurance Waiver and Indemnity:

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Pending \_\_\_\_\_ Date: \_\_\_\_\_

Saskatchewan Athletics  
Saskatoon Field House  
2020 College Drive  
Saskatoon, SK S7N 2W4  
Ph: (306) 664-6744 Fax: (306) 664-6761  
e-mail: [athletics@sasktel.net](mailto:athletics@sasktel.net)  
HomePage: <http://www.saskathletics.ca>

## Sanction Fees Form for Off Track Events

Complete and return to Saskatchewan Athletics  
at the time you are making payment for sanction fees

Name & Location of Event \_\_\_\_\_

Date of Event \_\_\_\_\_

Application Fee \$15 (member/Club) \$30 (non-member/Club) \_\_\_\_\_

Late Fee \$50 \_\_\_\_\_

Off Track Event \_\_\_\_\_ athletes @ \$3.00 to a maximum of \$5000

Total Female Athletes \_\_\_\_\_ Total Male Athletes \_\_\_\_\_

Total \$ \_\_\_\_\_



**Make cheque payable to Saskatchewan Athletics**

**For Office Use Only**     VISA    MC    CQ    CA

Card number/expiry date \_\_\_\_\_

Cardholder signature \_\_\_\_\_

Cardholder name \_\_\_\_\_