CROSS COUNTRY NL EVENT BID APPLICATION

<u>GEN</u>	<u>ERAL</u>			
A)	NAME OF CLUB			
	ADDRESS			·
	PHONE	FAX	EMAIL	
B)	CONTACT PERSO	ON		
	ADDRESS			
	PHONE	FAX	EMAIL	
TEC	CHNICAL			
a.	Attach a map and profile of the course/courses and include:			
		- start / finish area		
		- location of checkpoints	and first aid points (if appropriate)	
		- location of chalet / wax	ing huts / parking	
b.	Do you have computer race management timing system? YesNo			
c.	Will you send out I			
d.	Will you use zone4	.ca for registration?		
e.	Will you upload res	sults on zone4?		
f.	What is your groon	ning equipment?		
g.	Are your trails sign	ed properly and will the	race course have adequate signage? _	
h.	Any other pertinent	t information		
ACC	COMMODATIONS			
a.	Can billets be prove	ided?		
b.	List hotels in area _			
ORO	GANIZATION			
		Committee		
			Email	
How	many trained officia	ıls do you have?		

NOTES:

YOU MUST HAVE A TD/TA APPOINTED IN CONSULTATION WITH THE DIRECTOR of OFFICIALS. YOU MUST HAVE TRAINED OFFICIALS IN ORDER TO BID FOR AND HOST THIS EVENT.

Please <u>present bid</u> to the Chair of the Events Committee <u>two weeks prior to the AGM</u>, in the year prior to the date the event is planned to take place.