

2016 NOMINATION KIT

"Festival of Football"

Queensland Paralympic 7-a-side Football Championships

Westside Sports Club, Grovely

Saturday 6 August 2016

THE EVENT

Hosted by Sporting Wheelies and Disabled Association, with the support of Football Queensland, the Festival of Football is open to ambulant players from throughout Queensland, with a disability. An invitation is also extended to players from interstate and internationally. The competition is open to men, women and juniors from novice through to elite level and will be played under FIFA Rules with Exceptions for Paralympic 7-a-side football.

2016 will once again see us play team based competition, whereby players will nominate as a team that they will play in for the entire competition. Each player must also complete an individual nomination form for contact purposes. If you do not have a team, please still nominate as an individual and we will place you in a team. Each squad should consist of 8 – 10 players.

Competition will commence in the early afternoon and the finals matches will be played under lights.

Athletes must be a current financial member of the Association and regularly competing in a local competition. For those not currently a member of our Association you can join for just \$22 a year for adults or \$16.50 a year for juniors.



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SCHEDULE OF EVENTS

Event	Dates	Venue
Arrivals	Friday 5 August	Brisbane Airport
Accommodation	Friday 5 – Sunday 7 August	Brisbane International, Windsor
Classification	Friday 5 August	Westside Sports Club, Grovely
Competition	Saturday 6 August	Westside Sports Club, Grovely
Presentation Function	Saturday 6 August	Westside Sports Club, Grovely
Departures	Sunday 7 August	Brisbane Airport

PLAYING VENUE

This event will be held at Westside Sports Club, Hanran Street, Grovely. A canteen will be open for the purchase of food and drinks throughout the afternoon and evening.

NOMINATIONS

To nominate for this event, each player must complete an Individual Nomination Form and return it along with the nomination fee of \$40 per athlete by Friday 8 July 2016.

One member of each team (preferably the coach) must complete and return the Team Nomination Form by Friday 8 July 2016.

The nomination fee includes:

- Nomination to the event
- Catered Presentation Ceremony
- · Ground transport between airport, nominated accommodation and the venue (if required)

Confirmation kits, with all updated information, will be emailed to competitors in late July.



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TEAM STAFF

Team Staff should complete the attached Team Staff Nomination Form and return it along by Friday 8 July 2016.

LATE ENTRIES

A late fee of \$25 will apply for all nominations submitted after Friday 8 July 2016. The final date for late nominations will be Friday 15 July 2016. This deadline must be met in order to confirm details with external suppliers.

WITHDRAWALS AND REFUNDS

Competitors wishing to withdraw from the event may receive a full nomination refund up until Friday 15 July 2016. There will be no refunds after this date. Please note: all withdrawals must be in writing. Withdrawals due to illness or injury must be accompanied by a medical certificate. Refunds will be processed within 2 weeks after the event.

CLASSIFICATION

If required, a classification session will be held on Friday 5 August 2016. classification schedule will be forwarded with Confirmation Packs.

GROUND TRANSPORT

Transport will be provided (for nominated athletes) to and from the airport, official accommodation and classification / playing venue as outlined below:

ARRIVALS: Friday 5 August pick up between 9am and 6pm only

DAILY SHUTTLES: Saturday 6 August (time to be confirmed) Sunday 7 August between 9am and 12 noon **DEPARTURES**:

** Athletes travelling outside these time periods are responsible for their own ground transport arrangements **



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FLIGHTS

If you are a Queensland athlete and would like the Association to book flights on your behalf, please complete the flights and ground transport sections on your Individual Nomination Form. If you are an interstate athlete or Queensland athlete booking your own flights, please advise us of your arrangements for transport purposes.

ACCOMMODATION

Our Association is currently holding a limited number of rooms which are available from Friday 5 to Sunday 7 August 2016 at the Brisbane International, Cnr Lutwyche and Bryden Roads, Windsor.

Room rates are as follows:

Twin \$155 per room per night and includes breakfast

Accommodation costs are the responsibility of the individual. If you require us to book accommodation for you please complete the accommodation section on the Individual Nomination Form. Please include payment for your accommodation with your nomination fees or it will not be booked for you.

MEALS

All meals are the responsibility of the athlete. There will be a canteen open at Westside Sports Club throughout the day on Saturday.

PRESENTATION FUNCTION

A catered presentation ceremony will take place after the final Saturday evening. The cost for this is included for all nominated athletes. Supporters can also attend at a cost of \$10 per person – please advise numbers and include payment with your nomination. Please note, numbers must be provided for catering purposes prior to the event, therefore supporters cannot book and pay on the day.

SUPPORTERS

Please advise if any supporters, friends or family are attending with the athletes and if arrangements for accommodation / flights / transport are required.



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QEENSLAND STATE TEAM SELECTIONS

This event will serve as the selection event for the 2016 National Paralympic 7-a-side Football Championships being held in Sydney in October. Selection of the Queensland team will be made by a selection panel present at the Festival of Football.

IMPORTANT SUBSIDY NOTICE - QUEENSLAND ATHLETES ONLY

Subsidy assistance for TRAVEL to the Queensland State Championships is available for <u>members with a physical disability</u> from regional areas of Queensland outside a 100km radius of Brisbane. Assistance will be provided for either: (a) airfares, (b) petrol reimbursement for car travel or (c) accommodation.

To apply, please complete the enclosed Application for Funding Form and return it with your nomination.

Attendance at State Championships is compulsory in order to be eligible for Association funding for national / international events. If you are unable to attend and wish to be eligible for future assistance, written notification of non-attendance must be received prior to the event.



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ENTRY CHECKLIST

Nominations will not be accepted until all are complete:

☐ Completed ALL sections of the Nomination Form					
☐ Provided accommodation requirements including room-mate preference (if applicable)					
☐ Provide flight or other travel details including for supporters					
☐ Listed any special dietary requirements					
☐ Queensland regional members: completed Application for Funding Form					
 □ Payment of all fees: ○ Nomination fee (\$40 per person) ○ Late fee if after 8 July 2016 (\$25 per person) ○ Accommodation (if applicable) ○ Supporters' presentation function (if applicable) 					

Send the completed Individual Nomination Form with payment to:

Sporting Wheelies and Disabled Association 60 Edmondstone Road, Bowen Hills QLD 4006 Phone: (07) 3253 3333 Fax: (07) 3253 3322 Email: mailbox@sportingwheelies.org.au



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INDIVIDUAL NOMINATION FORM

NAME: ADDRESS: DATE OF BIRTH: (MOB)	/ /	EMAI	POSTCOD PHONE: (H		Female	
<u>Please Note:</u> Confirmation ki address above. If you do not be sent via post to the addres	have access to ema					
PAYMENT SECTION						
	<u>OFF</u>	FICE USE ON	NLY			
Financial Member: YES / N	10	Debtor	: YES	/ NO		
Name of Event: 2016 Festiva	al of Football	Job Code: S	ST Football	Acc Coc	de: <u>4-4400</u>	
Amount Received: \$	Rece	eipt No:		Date	e Received _	//
Nomination Fee:	\$40 per athlete	е		\$		
Late Nomination Fee:	\$25 (if sent aft	ter 8 July 20	16)	\$		
Accommodation (see info	ormation kit)	x people x	k nigh	ts \$		
Supporters attending pre	sentation functio	n x pe	eople x\$10 p	p \$		
		TOTA	۸L:	\$		
☐ Please send me a Recei	pt					
Cash Payment made to Payment can also be				ash in the	mail)	
☐ I authorise the payment	from my levy acco	ount		(a/c nu	umber)	
Name	Date: /	/ Sigr	nature:			
☐ Cheque /Money order e	nc (payable to Sp o	orting Whee	lies and Disa	abled Ass	sociation)	
BANK options Direct Depo	osit to: Sporting W	/heelies BSB	8: 034 143 Ac	count: 1	12275	
☐ Via Internet: please use Smith, H ST FOOTBALL)						
At a branch: please call	07 3253 3333 and	d a reference	number will b	e given t	o you	
Credit Card Payment option	ons					
☐ Please call (07) 3253 33	333 and vour paym	nent will be pr	ocessed ove	r the phor	ne immediatel	V



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TEAM					
☐ I will be playing with (team name)☐ I am not currently in a team, please allocate me					
MEMBERSHIP					
 I am a member of Sporting Wheelies and Disabled Association I am a member of another state association I am an international competitor and a member of 					
CLASSIFICATION					
I HAVE BEEN CLASSIFIED					
Date Classified: / / Classification					
If you have not been classified, do you want to be classified for football? YES / NO					
What is your disability?					
(if yes, an appointment will be made for you on Friday 5 August 2015)					
EMERGENCY CONTACT					
Next of Kin Relationship					
Contact Number					
PRESENTATION FUNCTION					
Will you be attending the Presentation Function on Saturday evening?					
☐ Yes ☐ No					
If you will have any extra people attending with you, how many? (NB \$10 per person)					
Do you or your supporters have any special dietary requirements:					



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TRAINING						
I am a first time competitor at this eve I compete in a social / local competition If yes, please note which program / cl	on?	Yes Yes	6	☐ No ☐ No		
ACCOMMODATION						
Do you require Accommodation to be	booked	for you?		☐ Yes	☐ No	
Dates Accommodation Required:	IN	/	/			
	OUT	/	/			
Who would you like to share with? * (preference it cannot be guaranteed)	note whilst	t every effo	ort will	be made to	ensure your	
Do you have any special requirements? * It is the responsibility of the athlete to organise any wanted roommate/s. If an athlete does not arrive or departs early for any reason, all fees incurred must be covered by that athlete. The Association does not take responsibility for accommodation fees.						
FLIGHTS						
☐ Please find my flight details below, which have been booked OR						
☐ Please make the following arrange	ements c	n my bel	half (0	Queenslan	d Athletes Onl	y)
Flying from	to	Brisbar	ne			
Arrival Date: / /	Arriv	al Time:		Flight No).	
Departure Date: / /	Dep	Time:		Flight No).	
GROUND TRANSPORT						
Do you require Ground Transport?		es		Ю		
<u>Please Note:</u> Transport to and from Brisbane Airport will be provided on certain days and times only – please consult the nomination kit for details.						



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TEAM STAFF NOMINATION FORM

ADDRESS: DATE OF BIRTH: (MOB)	:	/	/	EMA	POSTCODE PHONE: (H)	≣ :	<u></u> гетаїе
<u>Please Note:</u> Confirm address above. If you be sent via post to the	u do not	have ac	ccess to				
TEAM							
Please specify wh	nich tea	ım you	will be \	with			
MEMBERSHIP							
☐ I am a membe	er of and	other st			d Association		
EMERGENCY	CONT	ACT					
Next of Kin				Relat	ionship		
Contact Number							
PRESENTATION	ON FU	INCTI	ON				
Will you be attend	ding the	Prese	ntation	Function on S	aturday eveni	ng?	
	Y	'es		☐ No			
If you will have ar (NB \$8 per person	•	people	e attend	ling with you, I	now many?		
Do you or your supporters have any special dietary requirements:							



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ACCOMMODATION					
Do you require Accommodation to be b	ooked fo	r you?		Yes	□ No
Dates Accommodation Required:	IN	/	/		
	OUT	/	/		
Who would you like to share with? * (no preference it cannot be guaranteed)	ote whilst ev	ery effort	will b	e made to e	ensure your
Do you have any special requirements	?				
* It is the responsibility of the athlete to organis departs early for any reason, all fees incurred take responsibility for accommodation fees.					
FLIGHTS					
 ☐ Please find my flight details below, which have been booked OR ☐ Please make the following arrangements on my behalf (Queensland Athletes Only) 					
Flying from	to I	Brisbane)		
Arrival Date: / /	Arrival	Time:		Flight No	
Departure Date: / /	Dep Tir	me:		Flight No	
GROUND TRANSPORT					
Do you require Ground Transport?	☐ Yes	[N	0	
<u>Please Note:</u> Transport to and from Brisbane Airport will be provided on certain days and times only – please consult the nomination kit for details.					



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TEAM NOMINATION FORM

One per team to be completed and returned by team staff or team captain

TEAM NAME:		STATE			
	·				
	NAME		CL	.ASSIFI	CATION
Player 1					
Player 2					
Player 3					
Player 4					
Player 5					
Player 6					
Player 7					
Player 8					
Player 9					
Player 10					
Coach:					
Other Staff:					
We are willing to ac	ccept other players	who are lookir	ng for a tear	n □ Yes	□No



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MEDICAL RECORD FORM - CONFIDENTIAL (all to complete)

Name: Disability:
 ☐ I have no current medical problems ☐ I have been passed 'medically fit' by a doctor on (Date) / / ☐ I have a minor medical problem(s), details are listed below
 I have a major medical problem for which: ☐ I am currently under a doctor's treatment ☐ I am currently managing myself - details are listed below
☐ I have special medical requirements – details are listed below Details:
Medical History (please include any specific and recent medical history):
Allergy Details (to medication, food, bee stings etc):
Signature: Date: / /
(Parent / Guardian if under 18)



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ATHLETE AND STAFF DECLARATION AND INDEMNITY (all to complete)

This waiver must be signed by all competitors and team staff.

- 1. I, whose signature appears on the bottom hereof in consideration of and as a condition of acceptance of my entry in the 2016 Queensland Paralympic Football Championships or associated event for myself, my heirs, executors and administrators hereby waive all and any claim, right of cause of action which I or they might otherwise have for or arising out of loss of my life or injury, damage or loss of any description whatsoever, which I may suffer or sustain in the course of or consequent upon my entry or participation in the above event. I will abide by the Competition Rules governing these events.
- 2. This waiver, release and discharge shall be and operate separately in favour of all persons, corporations and bodies involved or otherwise engaged in the promoting or staging of the event and the servants agents; representatives and officers of any of them and includes, but is not limited to The Sporting Wheelies and Disabled Sport and Recreation Association of Queensland Inc., Event Sponsors, Producers, Directors, Volunteers and Officials.
- 3. I attest that I am physically fit and have sufficiently trained for competition of the entered events.
- 4. I consent to receive medical treatment, which may be advisable in the event of illness or injuries suffered by me during this event.
- 5. I give permission for the free use of my name, voice or picture in any broadcast, telecast, advertising promotion or other account of this event or the Association.
- 6. Should the event be cancelled for any reasons I understand that entry fees will not be refunded and that no liability of any kind will attach to any person, corporation or body involved or otherwise engaged in promoting or staging of the event.
- 7. Safety precautions undertaken by qualified officials are a service to me and other competitors but are not a guarantee of safety. I agree to abide by the conditions of the events as stated in the declaration above and upon literature and other material distributed in connection with the events.
- 8. I understand that the Association will make arrangements for myself and supporters flights / accommodation / ground transport based on the information provided by me. I understand that I will be responsible for all costs incurred based on this nomination form and that if I cancel the provided arrangements before the event (without a medical certificate), I will be responsible for all cancellation fees and additional fees if I need to be replaced in a squad.

SIGNATURE:	Date:	/	/
DECLARATION FOR MINORS (under 18) mu	ıst be signed	by pare	ent / guardian.
Parent / Guardian Signature:	Date:	/	1



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CODE OF CONDUCT (all to complete)

1. General

The purpose of this document is to provide a guideline as to the standards of conduct expected by the members of Sporting Wheelies and Disabled Association in all aspects of its operation.

Sporting Wheelies and Disabled Association is the state body for athletes with a physical disability or vision impairment. Athletes, team staff and club administrators who share in the status and profile of the Association have a responsibility to conduct themselves, both in and out of competition, in a manner that will not lessen the high regard in which the Association is held by the public.

2. Athletes and Team Staff

It is important that when athletes and team staff are representing the Association, they abide by the code of conduct.

2.1 Representation

When representing the Association, a professional manner is required at all times. It is important to understand the need to:

- respect views and comments of all members and stakeholders
- address all inquiries or complaints by athletes or team staff.

It is important to understand that members are representing the Association

- whilst travelling to and from competition
- during competition
- during training
- whilst attending functions / meetings relating to the Association
- whilst wearing part of the Association or Queensland uniform
- whilst liaising with key stakeholders
- during contact with the media.

2.2 General

It is the responsibility of athletes and team staff to:

- abide and be bound by the rules governing the event / competition
- act in a manner and behaviour which reflects positively on themselves, the team, the Association and our sponsors
- remain under the control, management and direction of the team manager or allocated team staff whilst travelling to, during and



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returning from the event / competition

- show respect during the playing of the National anthem
- refrain from using offensive or abusive language
- be aware of risks associated with participation and / or competition in their chosen sport / field of endeavour.

2.3 Uniform

When wearing the uniform of the Association, whether travelling, competing or casual wear, athletes and team staff must ensure it is clean, smart and respectable.

2.4 **Health and Fitness**

- Athletes are required to have undertaken specific training to render themselves fit for competition and understand that they will need to maintain adequate fitness in order to be included in the team.
- A Athletes and team staff are to provide consent to the disclosure of any medical conditions to team management and the Association and agree to disclose any ailment / injury that might prejudice their participation in the event / competition. Furthermore, team members must agree to be examined by a medical practitioner prior to departure, if required.
- ▲ If any injury / illness should arise during or as a result of your participation in an event / competition, team members must agree to receive appropriate treatment and pay for associated expense/s, other than those covered by insurance and / or Medicare, which may be incurred in connection with such injury / illness.

2.5 **Training**

- Athletes are required to attend all team training sessions, punctually, unless special circumstances prevent them from doing so, in which case, they must notify the head coach of their unavailability.
- ▲ Team members who do not attend 90% of team training sessions, may be dropped from the team regardless of whether special circumstances or otherwise have prevented them from doing so. This will be at the discretion of the team head coach. Exceptional circumstances will be considered.
- A Athletes must have and maintain the equipment and attire necessary to participate in the event / competition. At all times, athletes should have such equipment ready for use before each team training session and before the game/s begin.

2.6 Competition

Athletes and team staff should participate in the true spirit of sportsmanship, showing respect and consideration for the administrators, opponents, referees and officials, and team members (athletes and team staff).



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2.7 **Drugs and Alcohol**

- Athletes and team staff are not to consume or administer prohibited or narcotic drugs for the duration of the competition or the preceding training period. The Association has adopted the Antidoping Policy of the Australia Paralympic Committee. Each individual is responsible for knowing which drugs are acceptable, including requirements for therapeutic medication. Any doubt regarding a particular substance should be referred to the coach / team manager.
- A Smoking and the consumption of alcohol may affect performance and are not permitted in preparation for and during competition. Athletes should be aware of competition rules governing these items.
- A Team staff are not permitted to consume alcohol whilst on duty. This includes, but is not limited to: whilst travelling, during games and training sessions, at event functions or presentations, and any other times where you hold a position of care of other members.

2.8 Media / Fundraising

- Athletes are to show willingness to participate in media and promotional activities. Approval must be given by the team manager before any interview or information is given to the media. At all times athletes are to refrain from publicly criticising the Association or its members and are to present a positive image for themselves, the competition and the Association.
- Athletes will attend and participate in all fundraising activities which the team engages.

2.9 **Sponsorship**

Athletes need to check with the Association before preparing a sponsorship proposal and all proposals must first be approved by the Association's Services Manager before being distributed.

2.10 Reporting and Breaches of Conduct

- Athletes and team staff are to report any incidents or breaches of conduct to team management immediately, or if no team staff are present to the event organisers and / or the Association. Please use the Association's 'Incident Report Form' in this process.
- The team manager, authorised person and / or the Association may take appropriate disciplinary action following a reported breach of conduct. These actions may include, but are not limited to, full removal of position within the team, exclusion from the competition, immediate return from competition and / or financial subsidy revoked etc.



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I, as a member in a team staff or athlete capacity, have read, understand and will adhere to the above code of conduct and understand the consequences for breaches of conduct.

Name	Signature	Date
If under 18 Parent / Guardian's Name	Parent / Guardian's Signature	Date

Authorised by Kelli Chilton Services Manager March 2010