



BICYCLE CENTRE
"The Bike Specialists"
CAIRNS



CAIRNS
BMX
NEED FOR SPEED



BICYCLE CENTRE
"The Bike Specialists"
CAIRNS

SUNCORP NORTH QUEENSLAND GAMES
10TH & 11TH April 2010

VENUE: Cairns BMX Club, Scott Street, Cairns

RULES:

- ABMX Rule 4E1(I), 4E4(I) & 4E6.
- Pro Open Men will race as per rule appendix 2 2(1) and MUST present BMXA approved log books at registration to receive prize money.
- Pro Open Men must navigate pro section of the track on any Open day when club official deems track safe to do so. Riders that cannot navigate the pro section will need to ride there age.
- Prize pool broken down as per current rule book.
- This will be a year of birth event.
- 3 registered riders constitute a class.
- Gender Equity applies.

NOMINATIONS: Nominations close 31 March 2010.

SEND NOMINATIONS TO: The Registrar, Cairns BMX Club Inc.,
PO Box 5538, Cairns Qld 4870
ENQUIRIES: Debbie Weber 0417 743 864
debbie@acapprovals.com.au

CLASSES

Sprockets	\$25.00
Age & Cruiser	\$30.00
2 nd Class (Cruiser only)	\$20.00
Pro Open Men	\$40.00
Pro Open Women	\$35.00
Awesome 12's	\$20.00

**PLEASE REMEMBER, THERE IS
A \$10.00 SUNCORP NORTH QLD
GAMES LEVY PAYABLE PER
RIDER WITH YOUR NOMINATION.**

Saturday 10th

Registration 1.30pm to 2.30pm
Gate Starts 1.30pm to 3.00pm
Racing Starts 3.30pm
2 motos - break - 2 motos

Sunday 11th

Gate Starts 8.00am
Racing Starts 9.00am
2 motos -break- final/7th moto
Presentations

BICYCLE CENTRE CAIRNS "Awesome 12's" - Race Moto 1, 3 & 5 + Final

Random Scrutineering on the day

LICENCES AND NUMBER PLATES TO BE SIGHTED AT REGISTRATION

Club Phone No: 40312728

APPROVED: *A. J. Muller*
DATE: 8/02/10



Suncorp North Queensland Games

9-12 April 2010

Phone: 1300 798 200

www.nqsports.com.au

Date _____

BMX

Personal Details

Firstname: _____
Surname: _____
Date of Birth: _____
Gender: **Male:** **Female:**
Address: _____
Suburb: _____
State: _____
Post Code: _____
Country: _____
Email: _____
Phone: _____
Phone: _____
Club: _____

Nomination Fees (See next page)

Sports Levy: **\$10.00**
Nomination Fees: _____
Merchandise: _____
Total Due: _____

Payment

Direct Credit to:
 Cairns BMX Club
 ANZ - BSB 014734
 Ac No. 498006601
 Please use surname for Reference.

Check payable to:
 Cairns BMX Club
 PO Box 5538
 CAIRNS QLD 4870

COMPETITORS AGREEMENT, WAIVER, RELEASE AND ACKNOWLEDGEMENT

I, _____ the undersigned, for myself and for my heirs, personal representatives and assigns, do hereby release and forever discharge the controlling bodies, organizers, officials, members property owners, employees and any other person, firm or corporation charged with responsibility or liability, from all or any claims, demands, damages, costs and expenses, loss of service and any other actions arising from any act or occurrence and particularly on account of ALL PERSONAL INJURY, DISABILITY, PROPERTY DAMAGE OR LOSS OF ANY KIND that I may hereafter sustain as a result of participation in any event, as a competitor official or spectator conducted by any club or organization affiliated with the official controlling bodies of BMX in Queensland. I full understand the nature of the activities to be conducted and acknowledge the hazards of the said activities. I voluntarily assume the risk of injury to my person, property and the property of others. In the event of any injury I hereby give my consent for proper medical treatment to be administered. By signing this document you, and those in your company, agree to comply with and be bound by the Code of Behaviour as it relates to riders, parents, spectators and officials. I agree to allow the site first aid officers to release any relevant information to BMX Queensland in the event I require first aid attention, this information being for insurance purposes. I am aware that any photographs, still or moving, that may be taken during the event may be published and used for publicity and promotional purposes by BMX Qld Inc.

- I in consideration of and as a condition of acceptance of my entry in the 2010 Suncorp North Queensland Games or associated events and functions, 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(s).
- 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 North Queensland Sports Foundation (or its member councils), the host sports organisations, Suncorp and other event sponsors and supporters.
- I attest that I am physically fit and have sufficiently trained for the rigours associated with this event
- I give permission for the free use of my name, my voice or picture in any broadcast, telecast, advertising promotion or other account of this event.
- Should the event be cancelled for any reason whatsoever I understand that full entry fees are not likely to 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 the event.
- Safety precautions undertaken by the qualified sports officials (such as event briefings, setting of special rules and actions to administer the rules) are a service to me and the other competitors but are not a guarantee of safety. I agree to abide by the conditions of the events as stated above, upon literature and other material distributed in connection with the events and as directed by any volunteer or official involved with the events.

Rider signature (or parent if under 18): _____ Date: _____

Name: _____ Club: _____

Address: _____ Post Code: _____

Phone Home: _____ Mobile: _____

NQSF OFFICE USE ONLY

Batch No: _____ Family Name: _____ Process Date: ____ / ____ / ____

Payment type: _____ Amount: \$ _____ Posted to Reg No: _____



Suncorp North Queensland Games

Please complete this page for your Events, Merchandise and Fees
(all costs should be carried over to the front page)

NOMINATION FEES

Sprockets	\$25.00
Age & Cruiser Classes	\$30.00
2nd Class (Cruiser only)	\$20.00
Pro Open Men	\$40.00
Pro Open Women	\$35.00
Awesome 12's	\$20.00

PLEASE NOTE

A \$10.00 Sports Levy is payable by every competitor.

EVENTS

Lic. #	Bike #	Class (Eg 10yr Boys)	M/F	Surname	First Name	DOB	TOTAL
Total Nomination & Camping Fees (Carry forward to front Page)							

Please help us at our Carnival? We need you!

We would really appreciate your help with positions during our carnival, please circle the position you would like to help us with.

Name: _____ (thank you very much for your time)

BERMS STAGING LINES BAILS CANTEEN

Enquiries: Debbie Weber (Registrar) debbie@acapprovals.com.au PH: 0417 743 864
 Emma Hoad (President) PH: 0449 632 72

Flyer Approved by Alan Muller

MERCHANDISE

Please place your merchandise Orders Here Including sizes
(Games T'Shirts \$15 each and Polo Shirts \$35 each).

Description	Quantity	Unit Price	Amount
TOTAL MERCHANDISE COST - (Please carry over to front page)			



Please check that you have completed all sections and carried forward the costs to the front page.
PLEASE NOTE: A \$10 GAMES LEVY IS PAYABLE ONCE PER COMPETITOR.

ENTRIES MUST BE RECEIVED BY 31 MARCH 2010