

INFORMED CONSENT AND AGREEMENT

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Rider Name

Event requesting entry:

Age (as at time of completing this form) – those under the age of 18 are required to have a parent or guardian view and sign this form:

Please mark each statement to confirm you have read and understand and agree with each statement:

- ☐ I have read and understood the EVENT RISK ASSESSMENT and accept the risks of international travel and event participation specific to this event.
- ☐ I acknowledge that I will be travelling to and attending this event at my own risk (regardless if I am or not wearing a NZ team uniform) and that I must take responsibly for risks that I may encounter.
- ☐ I acknowledge Cycling New Zealand's current [position statement](#)
- ☐ I understand this process and application is part of the Selection Policy
- ☐ I agree I will not place myself intentionally at risk while attending the event
- ☐ Medical treatment overseas could result in significant financial costs and you may not immediately be able to return to NZ. It is my responsibility to ensure that I have appropriate insurance or other arrangements in place to meet any medically-related financial costs or additional accommodation arrangements that may arise and ensure I have the appropriate available cover.
- ☐ I acknowledge that I am responsible for all my travel, accommodation, Visa's, MIQ (where required) and associated logistics (unless specifically confirmed otherwise by CNZ).
- ☐ If my event entry is approved, I agree to conduct myself in line with the Cycling New Zealand Code of Conduct and all other Cycling New Zealand Policies.
- ☐ If my event entry is approved, I acknowledge that CNZ reserve the right to revoke any endorsement of entries if the situation deteriorates significantly and my health and safety will be compromised.
- ☐ By CNZ entering me into the event, I agree to abide by all UCI and Event Organizers requirements.

FUNDING PARTNERS



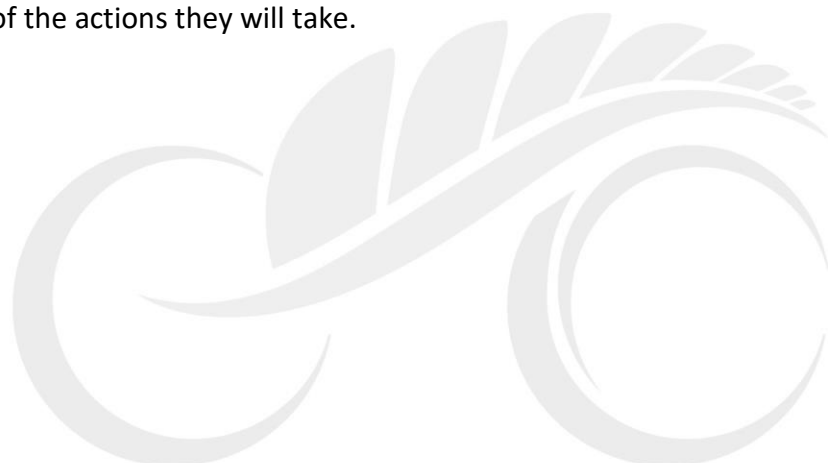
PERFORMANCE PARTNERS



- ☐ I agree I am responsible for any costs or administration associated with my return to NZ
- ☐ Unless specified by CNZ, I am solely responsible for my own support system while travelling and racing.
- ☐ I acknowledge that the event could be cancelled at any time up to and during the event which may significantly impact me.
- ☐ COVID-19 has not and cannot be completely eliminated and accordingly, there remains a risk of contracting COVID-19, despite the risk mitigation plans that have been put in place.
- ☐ I acknowledge the risk associated with international travel during a global pandemic.
- ☐ Prior to departure, any COVID-19 testing requirements will be at my own cost
- ☐ I will seek further information if required to ensure I am fully informed of the risk of international travel at this time
- ☐ I acknowledge the following specific risks have been identified and I have considered how I will reduce the risk associated. This planning is subject to approval.

| Risk | My plan to reduce the risk |
|------|----------------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |

- ☐ If my event entry is approved, I acknowledge CNZ could revoke my entry if I am not following the plan below or not responsibility addressing any new risks
- ☐ I agree that the information provided in this entire document is a true and accurate representation of my understanding of this persons reasons for requesting an international event entry is an accurate representation of the actions they will take.



Name of applicant:

Signature of applicant:

Date:

Minors (this section is only for those under the age of 18 at the time of selection) and must be completed by a parent or legal guardian.

- ☐ I agree I have read, understood the Event Risk assessment and the above conditions and agree for the rider to be considered for selection or entry.
- ☐ I understand that Cycling New Zealand recommend all riders under the age of 18 at the time of selection to travel with a responsible adult accompanying them.

Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date

