



MEMO TO: Queensland Athletes 13 – 23 years, as of 31 December, 2012
[Born 1999, 1998, 1997, 1996, 1995, 1994, 1993, 1992, 1991, 1990, 1989]

SUBJECT: Triathlon Queensland Development Squad 2011-2012

All age-eligible Junior and U23 athletes who are Queensland residents and members of Triathlon Queensland [TQ] for 2011 – 2012 are invited to join the Triathlon Queensland Development Squad [TQDS].

Benefits of Triathlon Queensland Development Squad

- Access to TQ Competitions, Development Clinics, Regional Clinics & Bike Skills Clinics
- Administrative Support
- Run singlet
- Pathway for athletes to gain membership to the Triathlon Queensland Emerging Talent Squad, Triathlon Queensland Talent Squad, and obtaining a scholarship with the QAS Triathlon Program

Procedures

- Athletes can join the Triathlon Queensland Development squad at any time during the season.
- Athletes wishing to trial for the Emerging Talent Squad [TQETS] and the Talent Squad (TQTS) must join no later than Monday, 15 August 2011.

Action Required

- TQ 2011-2012 Membership [join online]. Athletes 16-19 Years 2012 need to join in the ITU Junior Category
- Submit the Athlete Details Form – page 1
- Submit the Triathlon Queensland Development Squad Code of Conduct including Parental Permission Form for U18 Athletes [signed] –pages 2 & 3
- Submit the Medical Form
- Submit the TQ Questionnaire/Goal Setting
- Pay the \$60.00 Development Squad membership fee [Payment Options below]
 - pay online when joining for the 2011-2012 season
 - credit card payment via phone 07 3369 9600
 - complete details on nomination form:

Direct Deposit – **BSB:** 034 072

Account No: 181168

Account Name: Triathlon Qld Ltd

Reference: TQDS & Athlete's Name

Return Athlete Details, Code of conduct, Permission, Medical Form & Questionnaire to:
Triathlon Queensland Ltd
Sports House 2.14
Caxton Street
MILTON QLD 4064 or scan & email to development@triathlonqld.com.au

TRIATHLON QUEENSLAND DEVELOPMENT SQUAD 2011-2012*ALL SECTIONS OF THIS FORM MUST BE COMPLETED***Athlete's Details**

Surname		First Name	
Date of Birth		Gender	
Address		Postcode	
Home Phone		Mobile	
Email address		Triathlon Club	

16-23 years 2012 only

Have you been endorsed by TQ to compete in draft legal events?	Yes	No
Do you have a professional licence?	Yes	No

Coach's Details

Surname		First Name	
Phone [H or B]		Mobile	
Email address			

Parents' Details

	Father	Mother
Name		
Phone [H or B]		
Mobile		
Best Email address		

All TQ Development Squad emails will be sent to the athlete, the coach and the parents.

Please note that it is the responsibility of the athlete or his/her parents to inform the TQ office by email if there is any change in the details provided on this form. If this contact information is not kept up to date, important information, with deadlines that must be adhered to, may be missed.

Singlet Size

Choose one from the table below.

Kids	10	12	14	16	
Adult Unisex	XS	S	M	L	XL

Payment Details

Bank Transfer			Credit Card			Amount 60.00	
Westpac	BSB: 034 072	ACC: 181168	Cardholder's Name	Visa	Mastercard		
Acc Name: Triathlon Queensland Ltd			Number				
Reference: TQDS & Athlete's Name			Expiry Date				

Payment can be made by phone TQ Office 3360 9600

Development Program 2011/2012 Season

CODE OF CONDUCT ALL ATHLETES

Triathlon Queensland has high expectations of the conduct and behaviour of members of its Development Squads.

Athletes are expected to:

1. Follow all directions of and respect the position of the managers/coaches in charge of the group.
2. Act responsibly at all times whether with the entire group or separated from supervision.
3. Understand and respect cultural and social differences of others and behave with sensitivity and due consideration for all.
4. Follow all regulations and codes specified by places of accommodation and the requests of staff.
5. Wear the Triathlon Queensland uniform for travel and competition

Athletes will NOT undertake any of the following (non exclusive) activities:

1. Smoke
2. Drink alcoholic beverages, whether in private or in public
3. Use (unless medically specified), or supply drugs
4. Souvenir or appropriate any property which is not their own, or commit any other law breaking offences
5. Accept any invitations from other groups
6. Enter clubs, nightclubs or bars, at any time
7. Leave their place of accommodation without permission from the coaches/managers in charge
8. If the athlete is U18, be transported in a car by another athlete, without prior written permission from a parent
9. Venture off on their own - athletes must at all times be accompanied by at least two other athletes or preferably a group, and only then with permission from coaches or managers

- 10. Question any decisions or directions given by coaches or managers
- 11. Use objectionable or obscene language, or speak in a loud manner that will attract attention
- 12. Engage in any activity likely to compromise or endanger the athlete or athletes, or likely to jeopardise the standing and reputation of Triathlon Queensland

ATHLETES MUST AT ALL TIMES UNDERSTAND WHEN ON A TRIP OR AT CAMPS, THAT THEY ARE AMBASSADORS FOR TRIATHLON QUEENSLAND. TRIATHLON QUEENSLAND CONSIDERS IT REASONABLE TO EXPECT A HIGH STANDARD OF BEHAVIOUR AND SELF-DISCIPLINE.

Serious breaches of this code of behavioural expectations will result in the athlete being sent home. If the athlete is U18 the athlete's parents will be notified. Triathlon Queensland reserves the right to send the athlete home by the first available transport. Any additional expense incurred in this regard will be the responsibility of the athlete, or his/her parents.

Athletes must understand that Triathlon Queensland views these behavioural expectations seriously and any breach of same can result in removal from Triathlon Queensland Development Squads.

I/We have read and understood the *Code of Conduct* and agree to abide by it.

Signed: _____
(Athlete)

Signed: _____
(Parent/Guardian, Athletes U18)

Name: _____

Name: _____

PERMISSION U18 ATHLETES

I, _____ give permission for my son/daughter,

(Name)

to attend the TQ organised activities and participate in the Triathlon Queensland Development Program, under the direction of the managers/coaches in charge.

Parent Signature

Date

MEDICAL DETAILS FORM

Surname	
Given Name	

Immunisation Details [Please complete. List others as appropriate]			
Injection	Yes	No	Date of Injection
Tetanus			
Hepatitis B			

Do you suffer from asthma?	Yes	No
If YES list medication		
Are you currently being treated by a medical practitioner or physiotherapist?	Yes	No
If YES list details and any current medication.		
Are you suffering from an injury or condition that is likely to be aggravated by competition?	Yes	No
If YES list details.		

Medicare Card Number		Expiry Date	
Cardholder's Name [1 st name on card]			
Athlete's Position [number] on Card			
Private Health Insurance Company			
Private Health Insurance Membership Number			

Please list any relevant medical history including any allergies.

Emergency Contact		
Name	Relationship to Athlete	Contact Details

It is the athlete's, or if U18 athlete's parent's, responsibility to ensure that the athlete is adequately covered for Medical, Hospital, Dental and Personal Accident & Injury Insurance. Triathlon Queensland will not accept financial liability for such expenses if they should arise. Where supervision of medication is required for athletes U18 while the athlete is away from home, parents will need to document details in separate correspondence to the Team Management.

Medical Authorisation

I hereby authorise the obtaining on my behalf of such medical assistance as I, or if athlete is U18 my son/daughter, may require in the event of accident or illness and guarantee to meet any costs incurred. I authorise the administering of anaesthetic if deemed necessary by the medical attending officer.

Signed _____ Athlete _____
 Parent or Guardian if U18

Triathlon Queensland is bound by Information Standard 42 – Information Privacy. Triathlon Queensland is collecting the information on this form for the purpose of facilitating the attendance of athletes at an event organised by Triathlon Queensland. The information will not be used or disclosed for any other purpose and will be held securely and protected against unauthorised access. The information will be provided to staff on a need to know basis and the privacy of the individual's whose information is provided will be respected. If you wish to access or amend the personal information provided on this form, please contact the Triathlon Queensland Office.

2011-2012

Triathlon Queensland Emerging Talent Squad

Triathlon Queensland Development Squad

Athlete Questionnaire and Goal Setting Overview**Please complete this questionnaire by typing into each table.****Athlete Details**

Surname		First Name	
Date of Birth		Gender	
Coach		Club	

Sport Specific Strengths

Before I began triathlon I competed in:	Swimming	Cycling	Running
What level did you reach in this sport/s? School Rep, Club, Region, State, National			
What made you take up triathlon?			
Things I would like to improve			

Results

1. Results in *ITU Junior Series* races or U23 events
2. Results in *School Sport* regional or state championships in triathlon, swimming, cross country or athletics & Cycling Queensland or Cycling Australia results

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List the outcomes you would like to achieve from your involvement in the program

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Race Goals for the Coming Season

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Individual Goal times for Time Trials to be achieved during the 2011-2012 season

Swim	Run

Teams I am striving to be selected in this season:

Australian ITU Junior Team 16-19	Australian U23 Team -Elite	
Australian Age Group 16-19 Sprint or 18-19 Olympic Distance Team	Australian Age Group 20-24 Sprint or Olympic Distance Team	
Regional School Sport Triathlon Team	State School Sport Triathlon Team	