

# Emergency Action + Response Plan

*A cycling event is subject to accidents that can be minor (road rash), serious (broken collarbone) or potentially life threatening (vehicular collision).*

*A qualified and experienced first-aid responder will be on-site during the event and will be responsible to take charge of the situation and administering the proper response as needed. The responder will be equipped with a suitable first-aid kit to treat most common injuries that may occur during a cycling race.*

*This Emergency Action Plan (EAP) details what is believed to be the most appropriate response to an emergency should it arise during the event.*

*As part of the sanctioning requirements of hosting an event, the race organizer is responsible for submitting a written Emergency action/response plan to Manitoba Cycling in advance to the race and for ensuring their event volunteers understand the protocols identified.*

## CONTACT INFORMATION

**EVENT NAME:** \_\_\_\_\_

**VENUE LOCATION:** \_\_\_\_\_

**EVENT DATE:** \_\_\_\_\_

### RACE ORGANIZER:

NAME	CELL PHONE	EMAIL

### RACE OFFICIAL (Commissaire):

NAME	CELL PHONE	EMAIL

*Reminder: Race Organizer and Official are responsible for reviewing the course layout in advance to identify potential hazards and mitigate any risk.*

### MEDIC DETAILS:

NAME	CELL PHONE	RADIO #

*Reminder: Race organizer provides course map to medical personnel.*

**ARE THERE ANY AREAS OF THE RACECOURSE OR VENUE UNREACHABLE BY CAR?**

Yes \_\_\_\_\_

No \_\_\_\_\_

**IF YES, HOW WILL YOU ACCESS SOMEONE IF THERE IS AN EMERGENCY?**

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**AMBULANCE:**

NAME	PHONE

**IS YOUR RACE VENUE SERVICED BY 911?**

Yes \_\_\_\_\_

No \_\_\_\_\_

**PROVIDE INSTRUCTIONS TO ACCESS VENUE:**

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**HOSPITAL (NEAREST TO RACE VENUE):**

NAME	ADDRESS	PHONE



		<ul style="list-style-type: none"> <li>• Keep athlete under medical supervision</li> </ul>
Athlete loses consciousness during event	<ul style="list-style-type: none"> <li>• Provide water and shelter for athletes.</li> <li>• Monitor condition of athletes during event</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• Treat symptoms</li> <li>• Keep athlete under medical supervision</li> </ul>
Telephone access	<ul style="list-style-type: none"> <li>• The first-aid responder, chief commissaire, and the organizer shall have immediate access to a telephone to contact emergency services</li> </ul>	<ul style="list-style-type: none"> <li>• As a back-up to cell phones, <u>where</u> is the nearest landline.</li> </ul>
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**OTHER NOTES:**

## ***AGREEMENT***

*I, the event organizer, certify that all measures have been taken to:*

- *Satisfy the terms of sanction.*
- *Offer an event in which risk to participants has been minimized to a reasonable extent.*

*I understand that failure to observe MCA Standards may result in revocation of the right to host future sanctioned events in Manitoba. I recognize the right of the Manitoba Cycling Association to cancel the event if either MCA standards or CCA regulations have not been met.*

**Host Club Representative (name):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

***EMAIL COMPLETED FORM TO MCA OFFICE AT LEAST 2 WEEKS PRIOR EVENT***  
***Cycling@sportmanitoba.ca***