



North Coast Academy of Sport

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201718 CYCLING PROGRAM TRIALS & DEVELOPMENT CAMP

Introduction

North Coast Academy of Sport (NCAS) is one of eleven regional academies throughout NSW. Supported by NSW Government – Office of Sport and Southern Cross University, NCAS with the support of Cycling NSW (CNSW) has, as our core business, the identification and development of talented junior cycling athletes on the North Coast of NSW.

In addition to intensive training camps, blood lactate testing, and squad tours to major events, squad members also receive an athlete education program which includes sports nutrition, sports physiology, sports psychology, drugs awareness, and media training. NCAS athletes will also be provided with an NCAS uniform and jersey.

Trials and Development Camp

The NCAS Trials and Development Camp has been developed for athletes not only wanting to trial for the 201718 program but athletes who are keen to further understand their athletic capabilities in the sport. The camp will involve fitness testing, time trials, video analysis, FTP Watt Bike profiling and track racing as part of the Coffs Harbour Cycle Club competition.

About the Program

The NCAS Cycling Program this year will only be focused on a squad of Road & Track cyclists who are successfully competing at club and regional level or higher. The aim of the program is to increase our squad member awareness and knowledge of their physiological capabilities and to maximise training effectiveness. Athletes will then be able to take this knowledge and understanding of their individual performance characteristics into competition scenarios for improved strategic riding and outcomes. Athletes will learn about tapering and peaking in anticipation of competing at certain events scheduled towards the end of our program.

The 201718 Cycling Program will be finalised once the demographics of successful athletes are known. NCAS is excited to announce this new program being driven by our CNSW selected Head Coach Aaron Virieux.



Cost

The trials and development camp is free of charge to eligible athletes.

Selection Process

To be eligible for selection into the North Coast Academy of Sport Cycling Program an athlete or parent / guardian must complete the attached forms and return them to the Academy office by the due date. Following trials, successful athletes will be selected by a panel which will include the following: NCAS Staff, Academy Head Coach, and a member from NSWIS / Cycling NSW.

Squad positions will be awarded to the riders recognised to have the potential to achieve selection into State or National squads as deemed by Cycling NSW / NSWIS in consultation with the NCAS Head Coach. The selection of the 2017/18 squad is expected to be finalised within 4 weeks following the trials. Successful applicants will be notified via email.

Eligibility to Apply

To be eligible for the NCAS cycle program, it is desirable that the applicant meet the following criteria:

1. Be turning 13-18 years old in 2017 (those outside these ages are encouraged to contact the Academy for further information)
2. Reside in the North Coast region
3. Complete and submit an application form as attached by **5.00pm Friday 1st September 2017**
4. Athletes must be gold license holders of Cycling Australia

Selection Committee

The Selection Committee will consist of:

- NCAS Head Coach – Aaron Virieux
- Cycling NSW / NSWIS Delegate
- NCAS Delegate

When will I find out if I have been selected?

Successful applicants will be usually notified via email within 4 weeks following trials.

Thank You and Best Wishes

John Kincade

Executive Director
North Coast Academy of Sport

North Coast Academy of Sport PROGRAM APPLICATION FORM



Cycling Trials & Development Camp 201718

All applications to be submitted to:
programs@ncas.org.au

Insert photo here
The photo needs to be a 'head and shoulders' shot.

Instructions to Cycling athletes wishing to trial:

1. Complete all sections
2. Write neatly using only black pen or digital completion
3. Return this completed form back to NCAS by **5.00pm Friday 1st September 2017**

Section 1: Applicant Details

First Name	
Family Name	
Email (athlete)	
Street Address	
Town	
Postcode	
Date of Birth	
Gender	
Home Phone	
Mobile Phone (athlete)	
Email (parent / guardian)	
Mother's name	
Contact ph no.	
Father's name	
Contact ph no.	
Other Emergency Contact Person & Contact Number	
ATSI-Diverse Background (Optional): Are you of Aboriginal, Torres Strait Island or other culturally diverse background? Yes / No	
School	
Cycle Club	
Cycling Australia Licence Number	

Section 2: General Sporting Achievements

Please attach extra pages if needed.

Summary of Sporting Performances & Representations (Selections/Awards/Squad Invites)	
National	
State	
Regional	
Zone	
Club	
Summary of Strengths and Weaknesses as a Cyclist	
Strengths	
Weaknesses	

Any Sporting / Athletic achievements or history that may assist us in understanding your level of athleticism

Section 3: Declaration

Athlete Declaration

The information I have provided is accurate and correct:

SIGNED BY ATHLETE: _____ DATE: _____

Parental Guardian Consent

I give my consent for my child to apply to trial for the NCAS Cycling Program:

SIGNED BY PARENT/GUARDIAN: _____ DATE: _____

North Coast Academy of Sport
ATHLETE MEDICAL FORM



Cycling Trials & Development Camp 201718

Complete the medical information below.

NCAS treats this information as confidential and is bound by its privacy policy. NCAS will only distribute this information to those people whom we consider need it to ensure your health and well being at NCAS events.

If you wish to discuss any matters on this form, please contact NCAS on (02) 6620 3073.

Field	Print Neatly In Black Ink
Athlete Full Name	
Medicare Number	
Do you have private medical cover?	
If yes, state provider and policy number	
Do you have ambulance cover?	
Date of last tetanus injection	
Blood type	
Do you suffer from asthma?	
If yes, detail your treatment plan	
Do you suffer from diabetes?	
If yes, detail your treatment plan	
Do you suffer from epilepsy or similar episodes?	
If yes, detail your treatment plan	
Do you suffer from allergies (foods, medications, stings etc)	
If yes, detail your treatment plan/s	
List any other personal medications and the reasons for their use.	
List all other medical / health related matter/s not already mentioned that NCAS should be made aware of as well their related treatment plan/s	
Details all significant injuries and treatments over the past 12 months.	
Emergency contact name and mobile number	

Parent's / Guardian's Name **(print)**: _____

Parent's/Guardian's Signature: _____ Date: _____