**Semper Fi CycloCross Relay Race Operations Plan**

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**Introduction**

With hosting our Semper Fi Wednesday Night CycloCross Race on November 13, we must look at the plans we intend to promote throughout the event, in terms of operations. The event will be a 45-50 minute relay race with suggested coed teams of 2-3 members. Through implementing all of these operational ideas, we can ultimately prevent any flaws that might occur at our event. With all active waivers, risk management assessments and emergency plans in place, we will be able to tackle any and all issues our Wednesday Night CycloCross Race might encounter.

**Planning Logistics**

**Registration Details**

Participants will be able to register for our event at Sky Ranch, the event location, on Wednesday, November 13. Registration starts at 3:00 PM and will close at approximately 3:25 PM. There is no fee to participate due to liability concerns, however donations are highly encouraged for both participants and spectators.

**Day of Timetable/Schedule**

Located in the Appendix as OP 1.

The race will start at 3:30 PM due to daylight and there will be a 24 hour notice of cancelation due to weather circumstances.

**Staffing**

Located in the Appendix as OP 2.

**Gantt Chart**

Located in the Appendix as OP 3.

**Participant Evaluation Form**

Located in the Appendix as OP 4.

**Venue**

**ADA Assessment**

The Sky Ranch CycloCross course is reasonable in terms of accommodations’ for those with disabilities. The entrance of the property is a large, open parking lot. People who have difficulties with vision or mobility will be able to enter the venue easily. The bathrooms are located within the Sky Ranch facility. Due to the short preparation time for our event, we are unable to gain access to port-a potties for Wednesday, November 13th. There are no accessible parking spots in the parking lot at the Fountain’s Sky Ranch (Bond, 2010).

**Environmental Impact & Sustainability Analysis**

The event will have a large catalytic effect on the surrounding area. The businesses that surround the Sky Ranch facility include an auto shop, piano repair shop, and windshield repair shop. The event will bring business to the shops that surround the event. The event may not create direct business to all of the shops but will generate an awareness of the businesses. With the location of the event at the Fountain’s industrial park, there will not be a large impact on the environment. Many of the business that surround the facility are self-storage facilities.

**Discussion of use**

The capacity of the Fountain’s Sky Ranch CycloCross course and venue is approximately 350 people. We will use this space by having all competitors competing at one time. Through this, we will have one person at the finish line taking note of the time. They will also ring the bell for the last lap of the race. The parking lot area has the capacity to hold 20-30 vehicles. There is also parking available to on the street adjacent to the facility. We will have a volunteer directing the flow of traffic as well as directing participants toward the venue. We will use a shorter version of the track and it will be marked off by caution tape.

**Human Resources**

**Job Descriptions:**

**Personnel/Registration**

This position is responsible for checking in all participants who have preregistered in to the event. They will also be in charge of signing up new participants and collecting money from them as well as spectators. There will be a donation jar at their station that they will watch over. Concessions will be sold at this station as well such as bottles of water. These positions will be filled by volunteer members from sport management with members from our group overseeing them. Our group members will assist them if they are unclear on any aspect of their duty if there is confusion on what is expected. There will be a short form to fill out to receive feedback on the event.

**Time Keeper/ Scorer**

This position is responsible for timing the participants in the race. This position will ensure that the race goes the predestined amount of time, plus the final lap. Referees will be filled by coaches, volunteers, and members from our group. All volunteers will be instructed beforehand on what they need to do by coaches and don’t need prior experience. Our group members will assist them if they are unclear on any aspect of their duty if there is confusion on what is expected. There will be a short form to fill out to receive feedback on the event.

**Crowd Management**

This position will make sure that the spectators remain in their designated areas and do not interfere with the participants during the event. This position will be filled by volunteers from sport management and watched over by a member of our group. Our group members will assist them if they are unclear on any aspect of their duty if there is confusion on what is expected. There will be a short form to fill out to receive feedback on the event.

**MC**

The MC position will make announcements during the event such as sponsors, promotions, and updates as to who is leading. This position will also help ensure that the event is kept on task and run in a timely and efficient manner. This position will be filled by a knowledgeable group member. There will be a script for certain announcements as well as constant updates on what needs to be announced. There will be a short form to fill out to receive feedback on the event.

**Organizational Hierarchy**

Located in the Appendix as OP 5.

**Staff Evaluation Form**

Located in the Appendix as OP 6.

**Risk management**

**Foreseeable Risks**

There are numerous risks we see that can occur at a CycloCross race. Through utilizing Getz’s breakdown of the risk types, we feel we can head off a majority of these issues. Some foreseeable risks we observed at Sky Ranch was a lack of handicap-accessible bathrooms, or facilities in general. However, this does not imply that this facility, such as a handicap-accessible bathroom, is brought in the day of our event.

**Physical Risks**

Some of the physical risks we see as apparent with the CycloCross race are inexperienced competitors, unannounced health risks, and the possibility of fights. Due to the high level of intensity at our event, we plan to keep all participants in a predetermined route for the entirety of the race.

**Facility Risks**

The risks we see at the current facility is the open nature of Sky Ranch. If there is something along the lines of a natural disaster, fire, or emergency, people would struggle with the outdoor ‘airstrip’ facility that is Sky Ranch.

**Financial Risks**

Financial risks we observed while at Sky Ranch were course tape and maintenance tools. This will come at a lofty price and if they happen to not donate their time for our event, will be expensive to rent for the four hours.

**Risk and Release/Image and Likeness Waiver Form**

Located in the Appendix as OP 7.

**FIST Analysis for Crowd Control:**

**Factors**

Some factors that might play into our crowd control are weather, crowd density, and trespassers. In concern to the weather, it is best to keep people complacent with adequate surroundings for rain, snow, hail, or sun. Crowd density should be solved through the vast property of the Fountain Industrial park. People can spread out and ultimately have the level of comfort they seek. As for trespassers, it will be simplistic to spot people who are not there to partake in the CycloCross event.

**Implications**

Some future effects of crowd control could be that people feel limited while trying to walk around a CycloCross course. It is important that spectators of the crowd know that it is ok to cut under course tape to get to a better viewing location. As long as with the under cutting of the tape, they do not hinder the racers.

**Strategies**

Some strategies we have are to mark the course adequately with caution tape, so the spectators know where the course runs. We also plan to mark out the course so racers are aware of turns and obstacles as well.

**Risk Prioritization Matrix**

Located in Appendix as OP 8.

**Incident Documentation Form**

Located in Appendix as OP 9.

**Concessions and Box office**

There will be no charge for participants or spectators, but donations are highly encouraged. Registration will be taking place before the event. We will have a space for participants to fill out the liability forms away from the entry way so that they do not block the doorway for entry into the building. There will only be one cash box used to keep the money in one place and accounted for. Water bottles will also be available at this table for one dollar for all spectators and participants. We will be in charge of all money that is being handled in the facility because the facility does not sell any merchandise or concessions. We will not allow alcohol in the facility under no circumstances, there is a risk of someone trying to bring in outside beverages being as there are alcohol purchase sources nearby but for our groups’ safety and the safety of the event no outside beverages will be allowed in the facility. Also our group and with the help from the facility faculty will ask anyone that is under the influence of alcohol to leave the event for safety along with liability reasons.

**Conclussion**

We believe this Wednesday relay CycloCross race to be unique as most races are competed as individuals and not as a team. This event will be successful in not only bringing awareness to the sport of CycloCross but also in donating funds to the Marines of the Palouse. This event will be properly managed and ran regardless of the unforeseen problems encountered with previous event plans.

**Appendix**

**OP 1: Day of Time Table/Schedule**

|  |  |
| --- | --- |
| 2:45pm | Group and volunteers arrive |
| 3:00pm | Registration window |
|
| 3:25pm | Registration closes |
| 3:30pm | Race starts (expecting 5-6 laps of racing, one wave) |
|
|
|
| 4:15pm | Race ends |
| 4:20pm | Closing statements and awards |
|
| 5:00pm | Participants departure |

**OP 2: Staffing Schedule**

|  |  |  |
| --- | --- | --- |
| Connor | Ryan | Cody |
| Greeter @ registration | Greeter @ registration | Train Volunteers |
| Seek donations in lot | Man sign-in | Seek donations in lot |
|
| Usher riders to start line | Head to lap board/ finish | Crowd Control/ Donations |
| Crowd Control | Bell Ringer/ Lap counter | Crowd Control |
|
|
|
| Usher riders off the course | Direct riders to Will/Connor | Meet riders in Parking Lot |
| Meet riders in Parking Lot and issue surveys | Meet riders in Parking Lot and issue surveys | Meet riders in Parking Lot and issue surveys |
|
| Collect surveys | Thank participants | Collect surveys |

|  |  |  |
| --- | --- | --- |
| Will | Kevin | Volunteers |
| Greeter @ registration | Greeter @ registration | Meet with Cody |
| Man sign-in | Seek donations in lot | Seek donations in lot/ Man counter |
|
| Usher riders to start line | Crowd Control/ Donations | Crowd Control/ Seek Donations |
| Crowd Control | Crowd Control | Crowd Control/ Seek Donations |
|
|
|
| Usher riders off the course | Meet riders in Parking Lot | Turn in all donations to table |
| Meet riders in Parking Lot and issue surveys | Meet riders in Parking Lot and issue surveys | Meet riders in Parking Lot and issue surveys |
|

**OP 3: Gantt Chart**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date & Task** | 11.8 | 11.9 | 11.10 | 11.11 | 11.12 | 11.13 |
| Contact all potential sponsors | **X** | **X** | **X** |  |  |  |
| PR/Press/Newspaper, TV, Mass emails, etc. | **X** | **X** | **X** | **X** |  |  |
| Posters/Signage Finalized | **X** | **X** | **X** | **X** | **X** |  |
| Recruit Volunteers | **X** | **X** | **X** | **X** | **X** |  |
| Finalize sponsorships |  | **X** | **X** | **X** |  |  |
| Community outreach and get everything ready for event |  |  | **X** | **X** | **X** | **X** |
| Call all involved in putting on event | **X** | **X** | **X** | **X** | **X** |  |
| Contact all participants via social medias and emails to generate buzz about event | **X** | **X** | **X** | **X** | **X** | **X** |
| Last minute details, finishing touches |  |  |  |  | **X** | **X** |
| CycloCross Event |  |  |  |  |  | **X** |

**OP 4: Participant Evaluation Form**

**Participant Evaluation Forms:** for all questions with a Likert scale, 1 is low and 5 is high

**1. How did you hear about us or register for our event?**

**2. List one thing that you would have changed about the Semper Fi Wednesday Night CycloCross Race?**

**3. List one thing that you enjoyed about the Semper Fi Wednesday Night CycloCross Race?**

**4. What is the likelihood you would participate in a Semper Fi Wednesday Night CycloCross Race again, if one were to be put on?**

**1 2 3 4 5**

**5. Do you feel that Marines of the Palouse was well represented at the Semper Fi Wednesday Night CycloCross Race?**

**1 2 3 4 5**

**OP 5: Organizational Hierarchy**

**Joey Fountain/Marines of the Palouse/Group Members**

**Time Keeper/Finish line official**

**Directional assistants Crowd Management Registration/Front Desk**

**OP 6: Staff Evaluation Form**

**Staff Evaluation Forms**

1. How could we better explain and clarify the tasks you were assigned to perform throughout the event?
2. What suggestions do you have that we could have done to better assist you with completing you’re assigned tasks?
3. What would persuade you to volunteer again for this event in the future?

**OP 7: Risk and Release/Image and Likeness Waiver**

**Risk and release/Image and Likeness waiver**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Birth Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To the best of my knowledge, I \_\_\_\_\_\_\_\_\_\_\_\_am in good physical condition and fully able to participate in this event. I am fully aware of the risks and hazards connected with the participation in this event, including physical injury or even death, and herby elect to voluntarily participate in said event, knowing that the associated physical activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RiSKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL IINJURY, INCLUDING DEATH, that may be sustained by me, or loss or damage to property owned by me, as a result of participation in this event.

I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, Semper Fi Wednesday Night Cyclocross Race, agents, and employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to

me, while participating in physical activity, or while on or upon the premises where the event is being

conducted. It is my expressed intent that this release and hold harmless agreement shall bind the members

of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased,

and shall be deemed as a RELEASE, WAIVE, DISCHARGE, and CONVENTION TO SUE the above named RELEASEES.

I hereby further agree that this waiver of liability and Hold Harmless Agreement shall be constructed in

accordance with the laws of the State of Idaho and Washinton. In signing this release, I acknowledge and

represent that I HAVE READ THE FORGOING waiver of liability and Hold Harmless Agreement, UNDERSTAND IT AND SIGN IT VOLUNTARILY as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreements

have been made; and I EXECUTE THIS RELEASE FOR FULL, ADEQUATE AND COMPLETE CONSIDERATION FULLY INTENDING TO BE BOUND BY SAME.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby irrevocably give to Semper Fi Wednesday Night Cyclocross, Pullman, WA, and its parent and affiliated companies, including: Fountain’s Sky Ranch Cyclocross, WSU Sport management department, Washington State university, and marines of the palouse assigns, licensees and successors the right to photograph, film and/or videotape me and/or to otherwise record my image and/or likeness and to use, publish, display, reproduce, copy and distribute my image and/or likeness, in all forms of media now known or later developed, including composite or modified representations and including on the Internet, for promotional activities for PRIDE including advertising, direct mail, catalogs, websites, exhibitions, flyers, brochures and presentations, throughout the world and in perpetuity. I waive any moral rights in my image and/or likeness in favor of PRIDE and its assignees and licensees for the above purposes. In particular, PRIDE is permitted, although not obligated, to include my name in connection with my image and/or likeness. I waive the right to inspect or approve versions of my image and/or likeness used for publication or the written copy that may be used in connection therewith and agree that PRIDE shall not be liable to me for any distortion or illusionary effect

resulting from the use, publication or display of my image and/or likeness take or made by or on behalf of

PRIDE. PRIDE is not obligated to utilize any of the rights granted in this Agreement. I agree that I shall have

no ownership of or other rights in the photographs, film, videotapes or other recordings of my image and/or

likeness take or made by or on behalf of PRIDE. I understand that Sky Ranch shall not be responsible for unauthorized duplications/use of my image and/or likeness by third parties on the Internet or otherwise. I release Semper Fi Wednesday Night Cyclocross Race’s assigns, licensees and successors from any claims that may arise regarding the use of my image and/or likeness including any claims of defamation, invasion of pirivacy or infringement of moral rights, rights of publicity or copyright.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name, First Name (please print) Signature

**OP 8: Risk Prioritization Matrix**

|  |  |  |
| --- | --- | --- |
| **Business Importance** | Medium Risk  Injury/Treatment  Public relations problems | High Risk  Permanent Injury  Exposure to infection |
| **Business Importance** | Low Risk  Short-term problem | Medium Risk  Injury/Treatment  Cross- infection |
|  | **Chance of Change** | **Chance of Change** |

**OP 9: Incident Documentation Form**

# **Accident/Incident Report Form**

Date of incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_ AM/PM

Name of injured person:

Address:

Phone Number(s):

Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male \_\_\_\_\_\_ Female \_\_\_\_\_\_\_

Type of injury:

Details of incident:

Injury requires physician/hospital visit? Yes \_\_\_ No \_\_\_\_\_

Name of physician/hospital:

Address:

Physician/hospital phone number:

Signature of injured party \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Date

\*No medical attention was desired and/or required.

Signature of injured party Date

Signature and Name of reporting party Date

Form will be filed with the Fountain’s Sky Ranch Facility and WSU Sport Management Group

**OP 10: Group Evaluation Form**

**Semper Fi CrossFit Group Evaluation**

1. Was each group member present, focused, on task and helpful during group meetings and class? Give an example of how each member was an asset to the group.
2. Did each group member communicate their schedule with the other members when it came to absences in class and meetings?
3. Did each member of the group accomplish their responsibilities when given a task to perform? Give examples.
4. How did each group member help run the event to ensure its success?
5. Would you want to work with the group members again in the future?

**Citation**

Per the American’s with Disabilities Act website, we have found our location to be capable of obtaining a reasonable accommodations title. (Bond, 2010)

Bond, R. (2010, July 23). *2010 ada regulations*. Retrieved from http://www.ada.gov/2010\_regs.htm