

# ATHLETE REGISTRATION AND PROVISIONAL ELIGIBILITY APPLICATION FORM (SEPTEMBER 2012)

## PART 1: ATHLETE REGISTRATION

This page to be completed by the athletes  
representative

Athletes Family/Last Name	
Athletes First/Given Name	
Nation/Country	
Sport(s) in which the athlete will compete	1 2 3

Date of Birth	(dd/mm/yyyy)	Male/Female	
---------------	--------------	-------------	--

Date by which registration in the Provisional Master List is needed: Note: You are advised to allow at least 8 weeks	(dd/mm/yyyy)
---	--------------

For Inas use only:

Sent to panel date:	1. <input type="checkbox"/>
	2. <input type="checkbox"/>

Notes
-------

1<sup>st</sup> Sport : \_\_\_\_\_ Date : \_\_\_\_\_  
 2<sup>nd</sup> Sport: \_\_\_\_\_ Date : \_\_\_\_\_  
 3<sup>rd</sup> Sport : \_\_\_\_\_ Date : \_\_\_\_\_

Scanned  Letter sent  Entered in database

ATHLETE'S NAME:

This page to be completed by the athletes representative

## DECLARATIONS AND PERMISSION TO USE INFORMATION

All athletes must sign or place their mark. If the athlete is under 18, or if the athlete is without legal competency to sign themselves, the second part should also be signed by the athletes parent or legal guardian.

ATHLETE DECLARATION (All Athletes must complete, by ✓ each box and signing below)

By signing this declaration I am saying that:

- a) I understand the eligibility criteria to compete as an athlete with intellectual disability.
- a) I confirm that I shall comply with and be bound by all of the provisions of the Inas Anti-Doping Policy, including but not limited to, all amendments to the Anti-Doping Rules and all International Standards as issued by the World Anti-Doping Agency and permanently published on its website. I acknowledge that National Federations, Inas and National Anti-Doping Organizations have jurisdiction to impose sanctions as provided in the Inas Anti-Doping Rules.
- a) I give Inas permission to use information in accordance with the Inas Data Protection and Information Handling Policy.
- a) I understand and agree to uphold the principles of the Inas Code of Ethics and the spirit of fair play.
- a) I agree to Inas using photographs and images of me for the purposes of publicity in print, electronic and other media, and can withdraw this consent at any time by writing to the Secretariat.
- b) I agree that data I have provided can be used for research purposes, as set out under the INAS research code, and this data will not identify me individually and be managed under the Inas Data Protection and Information Handling Policy.
- a) I give Inas permission to use this information to decide whether I am a person with intellectual disability for eligibility and sports classification and to share this information with relevant organisations including, but not limited to, IPC and IF's.
- a) As far as I know, all the information in my application is true and accurate.
- a) I understand what the information in this form is being used for, or I have had this explained to me.

\_\_\_\_\_  
(Athlete's Signature or identifying mark)

\_\_\_\_\_  
(Date)

PARENT OR LEGAL GUARDIAN (only if the athlete is Under 18, or Over 18 and without legal capacity to give consent)

By signing this declaration I am saying that the athlete named above is under 18 years, or without legal capacity to sign on their own behalf. I understand the above declarations and have the legal right to sign on behalf of this person.

\_\_\_\_\_  
Signature + print name

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Relationship to Athlete

### INAS NEWSLETTER

Subscribe to the Inas newsletter?

No

Yes

Email address \_\_\_\_\_

### CONFIDENTIALITY AND DATA PROTECTION

Inas member nations should attach any statement regarding privacy of information and/or other legal statements that may be required, giving regard to the Inas Data and Information Handling policy.

ATHLETE'S NAME:

PART 2: EVIDENCE

This page to be completed by the National Eligibility Officer

In my capacity as a professional with expertise in assessment/diagnosis of intellectual disability, I certify that the above named athlete is a person with intellectual disability. My statement is based on assessment results that show the athlete has: (please ✓ all that apply)

	Yes	No
Significant impairment in intellectual functioning (see guidelines for eligibility criteria)		
Significant limitations in adaptive behaviour as expressed in conceptual, social, and practical adaptive skills (see guidelines for eligibility criteria)		
Intellectual disability evident during the developmental period, which is from conception to 18 years of age		

EVIDENCE ATTACHED:

IQ/Adaptive Behaviour Test results (if available)	
Other evidence attached (please state details)	

NATIONAL ELIGIBILITY OFFICER ENDORSEMENT

Name	_____
	(Last Name or Family Name)      (First Name or Given Name)
Signature	
Date	

ATHLETE'S NAME:

**PART 3: ENDORSEMENT**

This page to be completed by the organisation submitting the application

I have read the preceding information. The information provided is complete and accurate to the best of my knowledge and I know of no reason why the athlete should not be considered for inclusion in the Inas Athlete Database.

Name of Inas National Member Organisation		
President or Secretary General		Seal
..... Signature	..... Position	
..... Printed Name	..... Date	

Form and all attachments	<ul style="list-style-type: none"> <li>Completed in English (unless specified otherwise)</li> </ul>	
Evidence	<ul style="list-style-type: none"> <li>Appropriate evidence of intellectual disability attached</li> </ul>	
Additional Attachments	<ul style="list-style-type: none"> <li>1 photo (with athletes name on the back)</li> </ul>	
	<ul style="list-style-type: none"> <li>Copy of Passport or similar photo-identification</li> </ul>	
Endorsements	<ul style="list-style-type: none"> <li>National Eligibility Officer</li> </ul>	
	<ul style="list-style-type: none"> <li>Inas Member Organisation</li> </ul>	

In order to avoid delays, please check carefully to ensure that all parts of the form have been completed, and all necessary evidence has been attached.