Athlete Classification Consent Form

1. I agree to take part in the World Sailing classification process as detailed in the World Sailing Classification Rules and Regulations, including the remote review of information that I submit via the classification database. I confirm that, to the best of my knowledge, I am medically fit to participate in Para sailing.
2. I accept the criteria of eligibility, qualification and participation laid down by World Sailing Classification Rules and Regulations.
3. I understand that this stage of the classification process is completed remotely. I agree to provide complete, accurate and truthful information and medical documentation, and to respond promptly to reasonable requests from the World Sailing Classification Team for clarification or additional information. I understand that providing misleading or incomplete information may result in my application being refused and/or me being disqualified from World Sailing events.
4. I agree that medical information and supporting documents that I upload and/or provide may be held and reviewed by the World Sailing Classification Team to support my Sport Class and Sport Class Status. I agree to the disclosure of information relating to my impairment, function and performance by my designated coach(s) and/or family doctor and/or consultant(s), if requested by the World Sailing Classification Team for the purposes of classification.
5. I agree and consent to World Sailing processing my personal data in any format, including my full name, date of birth, sport, Sport Class and Sport Class Status. I agree and consent to my name, gender, country, year of birth, Sport Class and Sport Class Status being published by World Sailing and shared with third parties such as the event organisers.
6. I understand that I have a right to access and correct the Personal Data that the World Sailing holds about me under data protection law and that I may withdraw this agreement at any time which will result in me no longer being eligible to compete in World Sailing Para Competitions.

☐ - Yes
☐ - No

I wish to assist World Sailing in developing the classification system and therefore allow the information and documentation I submit for classification (and any photographs or video material that I choose to upload) to be used for research and educational purposes by World Sailing. I understand that I may withdraw this consent at any time.

ATHLETE

Athlete First Name……..

Athlete Last Name……..

Athlete E-Mail Address……..

Athlete Signature……

Date of Signature……

PARENT / GUARDIAN (If Applicable)*

☐ I confirm that I am the legal guardian / parent of the above-named athlete & I consent for them to undergo the classification process as detailed above.

Parent / Guardian First Name……

Parent / Guardian Last Name……

Parent / Guardian E-Mail Address……

Parent / Guardian Signature……...

Date of Signature……

**This field is mandatory if the Athlete is Under 18 (eighteen) Years of Age*