

## NATIONAL CLASSIFICATION ATHLETE CONSENT FORM

For a paddler to be eligible to compete in Paddle Australia (PA) Paracanoe events, the paddler must be classified under the ICF Classification guidelines.

Failure to cooperate with the Classifiers or failure to complete the classification procedure will lead to ineligibility to compete in the PA event.

The Classification process will be conducted with all due care to limit any discomfort to individual paddlers. However, failure to complete the classification process, regardless of discomfort, will result in the paddler not being classified and therefore not being eligible to compete in PA events. The paddler may withdraw their consent at any time but the process will then not be undertaken and the paddler will not be classified and will also not be eligible to compete in PA Paracanoe events.

By signing this consent form the paddler agrees to waive his/her rights to make any claim against the Classifiers, PA or anyone who might then claim against the Classifiers or PA, for indemnification for any damages or claims of personal injury or any other claim arising from or in any way related to the classification procedure of the paddler. The paddler agrees to fully indemnify PA and the Classifiers should any claim be made against them in any way related to the classification of the paddler.

The following is an agreement by the paddler, and/or the paddler's parent/legal guardian where appropriate; consenting that the paddler agrees to fully participate in PA identified Paracanoe eligibility criteria and classification procedure.

PA will only use the information for the administration of Paracanoe classification. By signing below the paddler agrees to complete the test honestly to the best of his/her ability.

I, of (Federation/Club) classified under the ICF identified eligibility criteria and		
I,parent/legal guardian of	(na	ame of paddler)
consent to the above on behalf of		
Signature of Paddler:	_ Date:	
Signature of Guardian:	Date:	
(Note: Confirmation of guardianship status may be required)		
Signature of Witness:	_ Date:	
Print witness name and address:		