

WWR Athlete Evaluation Agreement Form

I wish to undergo the Athlete Evaluation process detailed in the World Wheelchair Rugby Classification Rules and administered by World Wheelchair Rugby and a designated World Wheelchair Rugby Classification Panel and acknowledge that the following steps are essential to complete this process

Please tick each box to indicate your agreement:

- I understand that this process may require me to participate in sport-like exercises and activities, which may include me being observed whilst competing. I understand that there is a risk of injury in participating in exercises and activities. I confirm that I am healthy enough to participate in Athlete Evaluation.
- I understand that I have to comply with the requests made by both World Wheelchair Rugby and the Classification Panel. This includes providing sufficient documentation to determine whether I comply with the eligibility requirements for WWR Wheelchair Rugby. I also understand that if I fail to comply with any such request then Athlete Evaluation may be suspended without a Sport Class being allocated to me.
- I understand that Athlete Evaluation requires me to give my best effort, and that any Intentional Misrepresentation of my skills, abilities and/ or the degree of my Impairment during Athlete Evaluation may result in me facing disciplinary action.
- I understand that Athlete Evaluation is a judgment process and I agree to abide by the judgment of the Classification Panel. If I do not agree with the decision of the Classification Panel, I agree to abide by the protest and/or appeal process as defined in World Wheelchair Rugby Classification Rules and the IPC Athlete Classification Code and International Standards.
- I understand that World Wheelchair Rugby may appoint Trainee Classifiers to participate in some or all components of Athlete Evaluation under the supervision of a Classification Panel, to develop Classifier Competencies.
- I may be videotaped and photographed during the Athlete Evaluation process and this may include my activity on and off the field of play during the Competition.
- My personal data (including my Sport Class, Sport Class Status and relevant medical information that has not already been collected by World Wheelchair Rugby in the WWR Eligibility Agreement), will be collected by WWR, my National Paralympic Committee (NPC) and/or my National Member Organisation (NMO) and be stored by WWR (including being transferred to or stored on WWR's owned or contracted servers) and used by WWR, my NPC and/or my NMO for the purposes of and to the extent necessary in relation to Athlete Evaluation and facilitating my participation in WWR Competitions.
- My Personal Data will be transferred to WWR (or designated representative) and/or the WWR Medical Committee if the Classification Panel, upon review of Medical Diagnostic Information or through any observation during Athlete Evaluation, is of the view that I may have a health condition which could be adversely impacted by my participation in the sport of WWR Wheelchair Rugby for the purposes of assessing that risk and determining the appropriate outcome.
- My name, gender, year of birth, country, Sport Class and Sport Class Status will be published by WWR and shared with my NPC, NMO and competition organisers.

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Additional Explanation (optional consent)

Use of personal data for research purposes

I wish to assist WWR in developing the Classification system and therefore allow my Personal Data, including video material recorded during training and competition, to be used for research and educational purposes by WWR in perpetuity, provided such Personal Data is anonymised prior to any publication.

Providing or not providing this consent does not affect the fulfillment of this Athlete Evaluation Agreement Form as a whole. If consent is not provided for research purposes, Personal Data will not be used for this purpose. If consent is provided, it can be withdrawn at any time by contacting the IWRF at: office@worldwheelchair.rugby

Release of Claims

I hereby release WWR and their respective executive members, directors, officers, employee, volunteers, contractors or agents, from any liability (to the extent permitted by law) for any loss, injury or damage suffered by me in relation to the collection of my Personal Data by my NPC or NMO and/or my participation in Athlete Evaluation.

Access to Personal Data

I understand that I have a right to access and correct the Personal Data that WWR holds about me under data protection law by contacting my NPC or NMO, who will, if required, contact WWR. I also understand that my eligibility to participate in the sport of WWR Wheelchair Rugby is contingent on my voluntary participation in Athlete Evaluation so that a Sport Class can be allocated to me. I also understand that I may withdraw my agreement to WWR processing and storing my Personal Data at any time. I further understand that the withdrawal of my agreement to the processing and storing of my Personal Data will result in me being ineligible to participate in the sport of WWR Wheelchair Rugby.

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Contact Details

I understand that I may contact WWR at: office@worldwheelchair.rugby should I have any questions about the content of this Athlete Evaluation Agreement Form and the use of my Personal Data.

Athlete family name:		Athlete first name:	
Athlete signature:		Date:	
Team support person family name:		Team support person first name:	
Team support person signature:		Date:	
Translator family name:		Translator first name:	
Translator signature:		Date:	

¹ Athlete representative signature is mandatory if the athlete is considered a minor or lacks legal capacity under National legislation.