PTT ID	
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DATE



ITTF-PTT Athlete Evaluation Consent Form

1	I agree to undergo the athlete evaluation process detailed in the ITTF-PTT Classification Code and administered by a designated ITTF-PTT classification panel. I understand that this process may require me to participate in table tennis 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.
2	I understand that I have to comply with the requests made by the classification panel. This includes providing sufficient documentation so as to allow a classification panel to determine whether I comply with the eligibility requirements for Para Table Tennis. I 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.
3	I understand that athlete evaluation requires me to give my best effort, and that any intentional misrepresentation of my skills, abilities or the degree of my impairment may result in me and my coach facing disciplinary action.
4	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 process as defined in the ITTF-PTT Classification Code
5	I agree to be videotaped and photographed during the athlete evaluation process and that this may include my activity on and off the field of play during the competition.
6	I agree and consent to ITTF-PTT processing my personal data in any format, including my full name, country, date of birth, sport, sport class, sport class status and relevant medical information. I agree and consent to my name, country and sport class and sport class status being published by ITTF-PTT and shared with third parties such as competition organisers.
	I wish to assist ITTF-PTT in developing the classification system and therefore allow my data collected during athlete evaluation and video material recorded during training and competition to be used for research and educational purposes by ITTF-PTT. I understand that I may withdraw this consent at any time.
P	RINTED NAME OF THE ATHLETE SIGNATURE DATE

SIGNATURE

COACH / GUARDIAN *

^{*} This signature is mandatory if the athlete is under 18 years of age or the eligible impairment is intellectual impairment.