



UNIQLO
WHEELCHAIR
TENNIS TOUR

WHEELCHAIR TENNIS TOUR 2017
INTERNATIONAL ENTRY FORM



TOURNAMENT NAME **Open de Vendée**

NATION **France**

DATES **11-12-13-14 May**

PLAYERS NAME

NATIONALITY

IPIN REGISTRATION NO

BIRTHDATE

TEL

EMAIL

CEL

TENNIS INFORMATION

NB: All players must have adequate travel and health insurance.

MEN:

WOMEN:

QUAD:

JUNIOR*:

ARE YOU APPLYING FOR A WILD CARD INTO THE MAIN OR SECOND DRAW?

MAIN: SECOND:

DO YOU WISH TO APPLY TO USE YOUR FEED UP CARD AT THIS TOURNAMENT?

YES NO

AT WHICH TOURNAMENT DID YOU WIN YOUR FEED UP CARD?

DO YOU INTEND TO PLAY DOUBLES?

YES NO

NB. This form does not guarantee entry to doubles. Both players must sign in in-person as required by the tournament.

ARE YOU BRINGING A REGISTERED COACH OR ADDITIONAL PERSONS

(Please Specify)?

If a coach, or any other person is accompanying you, please complete a separate form for each person travelling

**Junior players will require the signature of a parent or guardian on the form in order to enter a tournament*

TRAVEL DETAILS

Note: Transport is provided for flights arriving & departing between 9am-11pm.

I WILL BE ARRIVING BY CAR: TRAIN: AEROPLANE: (Please tick one: **X**)

DATE OF ARRIVAL: _____ TIME: _____ FLIGHT NO: _____ AIRPORT: _____

DATE OF DEPARTURE: _____ TIME: _____ FLIGHT NO: _____

NO. OF CHAIRS : _____ NO. OF PEOPLE: _____ T-SHIRT SIZE: S M L XL

ACCOMMODATION REQUIREMENTS

DO YOU REQUIRE ACCOMMODATION:

YES NO

EVERY DAY WHEELCHAIR USER:

YES NO

ROOMING PARTNER: _____

SPECIAL REQUIREMENTS: _____

ALL PLAYERS MUST AGREE AND SIGN THE FOLLOWING CLAUSE:

I hereby agree to abide by the ITF Rules of Tennis, the ITF Rules of Wheelchair Tennis and pay the entry fee as required by the tournament. I confirm that I have read and understood Article 24 of the Wheelchair Tennis Rules and Regulations 2015 and further that in accordance with Article 33(k) of the same that I have adequate travel and medical insurance. I further agree to abide by the ITF Code of Conduct in all Main Draw events or by the Code of Conduct adopted by the tournament in any other draws. I also agree for participation in the tournament to be bound by and comply with the all the provisions of the ITF Tennis Anti-Doping Programme 2015. I note that the Tennis Anti-Doping Programme is set out in full on the ITF website (www.itftennis.com) and in a separate rulebook that is published and distributed to all the National Associations and is also available upon application.

I understand and agree that I have a medically diagnosed permanent physical disability as defined in the Rules of Wheelchair tennis, found at www.itftennis.com/wheelchair/rules/eligibilityrules.asp and that I am eligible to compete in ITF sanctioned wheelchair tennis tournaments. I understand that if requested by the ITF, I am required to supply appropriate medical documentation that substantiates the disability.

Anti-Corruption

I am bound by and will comply with the Uniform Tennis Anti-Corruption Program (the “Anti-Corruption Program”), a copy of which is available upon request from the ITF or may be downloaded at <http://www.tennisintegrityunit.com>. The Anti-Corruption Program will govern my participation in ITF-sanctioned events (alongside the ITF Rules, including the Player Code of Conduct and the ITF Tennis Anti-Doping Programme, each of them applying concurrently and without prejudice to the other). The Tennis Integrity Unit may conduct investigations in relation to ITF- sanctioned events under the Anti-Corruption Programme, and will enforce any penalties, sanctions and/or other measures taken against me under the Anti-Corruption Programme. I hereby submit to the jurisdiction and authority of the ITF to manage, administer and enforce the Anti-Corruption Programme and to the jurisdiction and authority of the Court of Arbitration for Sport to determine any appeals brought under the Anti-Corruption Programme.

Anti-Doping

I am bound by and will comply with the Tennis Anti-Doping Programme (the “Anti-Doping Programme”), a copy of which is available upon request from the ITF or may be downloaded at <http://www.itftennis.com/anti-doping>. The Anti-Doping Programme will govern my participation in ITF-sanctioned events (together with the ITF Rules, including the Player Code of Conduct and the Uniform Tennis Anti-Corruption Program, each of them applying concurrently and without prejudice to the other). The ITF may conduct anti-doping testing at ITF-sanctioned events under the Anti-Doping Programme, and will enforce any penalties, sanctions and/or other measures taken against me under the Anti-Doping Programme. I hereby submit to the jurisdiction and authority of the ITF to manage, administer and enforce the Anti-Doping Programme and to the jurisdiction and authority of the Anti-Doping Tribunal and the Court of Arbitration for Sport (“CAS”) to determine any charges brought under the Anti-Doping Programme.

NAME:(Block) _____ SIGNED: _____ DATE: _____

FOR JUNIORS ONLY:

GUARDIAN'S
NAME:(Block) _____ SIGNED: _____ DATE: _____