WKF Athlete Evaluation Consent Form



I, the undersigned, confirm my understanding and agreement to undergo the Athlete Evaluation process as detailed in the World Karate Federation (WKF) Classification Regulations, administered by a designated WKF Classification Panel. By signing this form, I acknowledge the following:

- € Participation in Evaluation: I understand that Athlete Evaluation may require me to engage in sport-like exercises and activities, which may include being observed while competing. I am aware of the potential risk of injury and confirm that I am healthy enough to participate in these activities. Should I be unable to complete the classification process due to pain, injury, or other reasons, I acknowledge that my classification may remain incomplete.
- € **Compliance with Requests:** I agree to comply with all requests made by the WKF Classification Panel, including the provision of sufficient documentation to determine my eligibility for Para-Karate. I understand that failure to comply may result in suspension of Athlete Evaluation, and no Sport Class will be allocated to me.
- € Effort and Honesty: I will give my best effort during Athlete Evaluation. I understand that any intentional misrepresentation of my skills, abilities, or degree of impairment may result in disciplinary action in accordance with the IPC Intentional Misrepresentation Rules.
- € Acceptance of Judgment: I understand that Athlete Evaluation is a judgment-based process, and I agree to abide by the decisions of the Classification Panel. If I disagree with the decision, I will follow the Protest and/or Appeal procedures outlined in WKF Classification Regulations.
- € **Recording During Evaluation:** I consent to being videotaped and photographed during the Athlete Evaluation process, which may include activities on and off the field of play during competitions.
- € Personal Data: I agree to WKF processing my personal data, including but not limited to my full name, country, date of birth, sport, Sport Class, Sport Class Status, and relevant medical information. My data will be securely stored and may be shared with third parties such as competition organizers.
- € Publication: I consent to the publication of my name, country, Sport Class, and Sport Class Status by WKF.
- € Health Conditions: If the Classification Panel identifies a potential health condition during Athlete Evaluation, I consent to WKF sharing my personal data with its Medical Committee to assess and manage any associated risks.
- € Use for Development: I wish to assist WKF in developing its Classification system. I allow my personal data, including video material recorded during training and competitions, to be used for research and educational purposes, provided that it is anonymized prior to publication. I understand that this consent is optional and may be withdrawn at any time.
- € I release WKF, its officers, employees, volunteers, and agents from any liability for loss, injury, or damage incurred during Athlete Evaluation, except where prohibited by law.
- € I understand my rights to access and correct the personal data WKF holds about me. I acknowledge that my eligibility to participate in Para-Karate is contingent on my voluntary participation in Athlete Evaluation and consent to data processing. Withdrawal of consent may result in ineligibility to participate in Para-Karate.
- € For any questions regarding this consent form or the use of my personal data, I may contact WKF at <u>wkf@wkf.net</u>

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

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

Please, upload this document as a PDF to the athlete's Sportdata profile.