

INTERNATIONAL ATHLETE

Name Competition:	
Event:	
City:	
Date:	
Name athlete:	
Gender:	
Code WA:	

I declare, agree and acknowledge that:

- a. the shoes I will compete in at the event are::

Company	
Model	
Size	
Colour	
Orthotics (i.e. if you have an insole for medical reasons)	

- b. I confirm that I have been advised that my competition shoes meet the requirements set out in Rule 5 of the Technical Rules (please mark with an **X**):

☐ verbally	☐ in writing	
☐ my coach	☐ shoe provider	☐ Athlete Representative

- c. I will follow the shoe check procedure at the event and understand that, even though the shoes are checked, they could be submitted for further random tests or full testing after I have finished competing;
- d. I cannot change my shoe for another shoe without having the replacement shoe checked in accordance with Rule 5 of the Technical Rules and in accordance with the kit and shoe check procedure at the event. I understand that it is at my risk, if I change my shoes without having them checked;
- e. After I have finished competing, the Referee has the right to request that I submit my shoe for further tests by an independent laboratory. I acknowledge and understand that, to confirm compliance with the requirements set out in Rule 5 of the Technical Rules, the further tests carried out by the independent laboratory may include the shoes being cut up.

Date: ____/____/____

Signature Athlete: _____