



CONSENT FOR FCS CLASSIFICATION

For a swimmer to be eligible to compete in IPC Swimming competitions the swimmer must be classified by authorised IPC Swimming classifiers. Failure to cooperate with the classifiers or failure to complete a classification will lead to ineligibility to compete in the competition sanctioned by IPC Swimming.

If the swimmer finds their ability to cooperate with the IPC Swimming classifiers limited by pain, the swimmer must agree to a full classification test regardless of that pain. The swimmer agrees to indemnify the classifiers from any pain and suffering caused by the testing.

The following is an agreement by the swimmer to undergo a functional classification test, medical [bench] and water test and observation during competition.

I.....**[PLEASE PRINT FULL NAME]** wish to be classified for the IPC Swimming competition.

I understand that the IPC Swimming classification process includes a bench [medical] test, a water [swim] test and observation during competition. I understand that to be classified I must be willing to take part in all components of the classification process and cooperate fully with the classifiers.

I understand that to perform the bench [medical] test, the IPC Swimming classifiers must examine all movements and muscle groups. I agree to undertake these tests, and I agree that the classifiers are indemnified from any pain and suffering I may experience in the course of the test.

Signature of Swimmer:

Witness Signature of guardian/manager/coach:

Date (dd/mm/yyyy):

For Swimmers under the Age of 18; Parents/Guardian's Acknowledgement

In consideration of the IPC Swimming Consent for FCS Classification Form, I/We, the undersigned, being person(s) with parental/ guardian responsibility for the above mentioned swimmer agree and understand that:

1. The swimmer is under the age of 18 years as at the date of signing
2. I/We have read and understood this form and have fully explained the content and implications to the swimmer
3. The swimmer has read this form and understands its content and implications

Name(s): _____

Signature(s): _____

DATE (dd/mm/yyyy): _____