

Athlete Classification Consent Form

I wish to undergo the final 3 stages of the IGF Athlete Classification Process (Eligible Criteria Assessment, Minimum Criteria Assessment, and Sport Class Assessment) as detailed in the International Golf Federation Classification Rules, and acknowledge that the following steps are essential to complete it.

1. I understand that participating in this process may involve engaging in sports-related exercises and activities, where I might be observed during competitions or practice sessions. I acknowledge that there is a risk of injury associated with these activities. I confirm that I am physically fit and healthy enough to participate in the Assessments.
2. I acknowledge that I must comply with the requests made by the IGF and the classification panel. This includes providing sufficient documentation to demonstrate my eligibility for an International Pass. I understand that if I fail to meet any of these requests, my athlete evaluation may be suspended, and I may not be allocated a sport class.
3. I understand that athlete assessment requires my best effort and that intentionally misrepresenting my skills, abilities, or the extent of my impairment during this process may lead to disciplinary action against me.
4. I understand that athlete assessment is a judgment process, and I agree to abide by the judgment of the classification panel. If I do not agree with the classification panel's decision, I agree to abide by the protest and/or appeal process as set out in the IGF Classification Rules.
5. I consent to being photographed and/or recorded in audio or video by IGF-certified classifiers during the athlete assessment process. This includes my activities both on and off the field of play. Any other photography, audio, or visual recordings of the athlete evaluation are strictly prohibited.
6. My personal data, which includes my sport classification, the status of my classification, and any relevant medical information (**not already collected by the International Golf Federation (IGF) in the IGF Underlying Health Condition (UHC) Assessment and Eligibility Consent Form**) will be gathered by the IGF, my National Paralympic Committee (NPC), and/or my National Federation (NF). This information will be stored by the IGF, which may involve transferring or storing it on servers contracted by the IGF. The data will be used by the IGF, my NPC, and/or my NF as necessary for athlete evaluation and to facilitate my participation in IGF-covered events.
7. My personal data will be shared with the IGF (or its designated representative) and/or the IGF Medical Committee if the classification panel determines, upon reviewing my medical diagnostic information or observing me during the athlete evaluation, that I may have a health condition that could be negatively affected by my participation in the sport of golf. This sharing of information is intended to assess the risk and determine the appropriate outcome.
8. My name, gender, year of birth, country, sport class, and sport class status will be published by the IGF and shared with my NPC, NF and competition organisers.

Use of personal data for research purposes.

I wish to assist the IGF in developing the classification system and hereby allow my personal data, including video recordings made during training and competitions, to be used for research and educational purposes by the IGF in perpetuity, provided that this personal data is anonymised before publication.

Please note that my decision to provide or withhold this consent does not affect the overall fulfilment of this Athlete Assessment Agreement Form. If I do not provide consent for research purposes, my personal data will not be used for this purpose. If I do provide consent, I understand that I can withdraw it at any time by contacting the IGF at: info@igfmail.org

Release of Claims

I hereby release the IGF, along with their executive members, executive director, employees, volunteers, contractors, and agents, from any liability (to the extent permitted by law) for any loss, injury, or damage I may suffer related to the collection, storage, and use of my personal data by the IGF, my NPC, or NF, as well as my participation in athlete evaluation.

Access to Personal Data

I understand that I have the right to access and correct the personal data that the IGF holds about me in accordance with data protection laws and as outlined in the **IGF Underlying Health Condition (UHC) Assessment and Eligibility Consent Form**. To do so, I can contact my NPC or NF, who will reach out to the IGF if necessary.

I also acknowledge that my eligibility to participate in the sport of Golf for the Disabled depends on my voluntary participation in the Athlete Evaluation, which is required for allocating a sport class to me.

Furthermore, I understand that I can withdraw my consent for the IGF to process and store my personal data at any time, as described in the **IGF Underlying Health Condition (UHC) Assessment and Eligibility Consent Form**. I recognise that if I choose to withdraw this consent, I will no longer be eligible to participate in events covered by the IGF.

Contact details

I may contact the IGF office should I have any questions about the use of my Personal Data: info@IGFmail.org

I have read, understood, and agree to comply with the Athlete Evaluation Agreement Form.

Printed name of athlete	Athlete Signature	Date
Printed name of athlete representative (mandatory if present, including if the athlete is a minor or lacks legal capacity under national legislation)	Athlete representative signature	Date