

REGISTRATION FORM FOR NEW ATHLETE

(PLEASE PROVIDE THE INFORMATION IN CAPITAL LETTERS OR IN PRINT ACCORDING TO THE LATIN ALPHABET)

1. Name (according to the athlete's passport)

Family name: _____

Given name: _____

2. Gender (F/M): ____

3. Date of birth (day/month/year): _____

4. Sport Nationality: _____

5. Nationality (in case it is different from Sport nationality): _____

6. Photo (only of the face of the athlete)

7. Passport copy

8. Contact Details & SMS Setup

- phone number (country code+ number): _____

- phone type (mobile, home, business): _____

- e-mail: _____

By ticking the box and signing this document I am giving my consent to the IWF and the ITA to process my personal information for the purpose of my ADAMS registration.

Date: _____

Athlete Signature: _____