



## Classification Consent Form

I, \_\_\_\_\_ agree to undergo the classification process as outlined in the IBSF Classification Rules and Regulations and administered by the designated IBSF classification panel. I understand that this classification process will require me to participate in sport-like exercises and activities. I understand that there is a risk of injury in participating in exercises and activities and that I am healthy enough to do so. I also agree that if I am injured during the course of this classification process that I will hold IBSF and the classifiers blameless.

I also understand that classification requires me to give my best effort during classification assessment for the classification panel. I understand the failure to give my best effort could result in me being disqualified from IBSF competition. I also understand that discrepancies between the performances I demonstrate during the classification process and that which I demonstrate during competition could also lead to my disqualification from IBSF competitions.

I agree to abide by the above and understand that classification is a judgment process and will agree to abide by the judgment of the classification panel. If I do not agree with the results of the classification panel I agree to abide by the protest and appeals process as defined in the Classification Rules and Regulations.

I agree to be videotaped and photographed during the classification process, training process and during competitions.

I understand that my name, date of birth, country and sport classification status will be available on the IBSF website.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Witness name, surname)

\_\_\_\_\_  
(Witness signature)