



**WHEELCHAIR TENNIS TOUR 2018  
INTERNATIONAL ENTRY FORM**



TOURNAMENT NAME **Open de Vendée**

NATION **France** DATES **22-23-24-25-26 May**

PLAYERS NAME \_\_\_\_\_

NATIONALITY \_\_\_\_\_ IPIN REGISTRATION NO \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ TEL \_\_\_\_\_

EMAIL \_\_\_\_\_ CEL \_\_\_\_\_

**TENNIS INFORMATION**

**NB: All players must have adequate travel and health insurance.**

MEN:  WOMEN:  QUAD:  JUNIOR\*:

ARE YOU APPLYING FOR A WILD CARD INTO THE MAIN OR SECOND DRAW? MAIN:  SECOND:

DO YOU WISH TO APPLY TO USE YOUR FEED UP CARD AT THIS TOURNAMENT? **YES** **NO**

AT WHICH TOURNAMENT DID YOU WIN YOUR FEED UP CARD? \_\_\_\_\_

DO YOU INTEND TO PLAY DOUBLES? **YES** **NO**

*NB. This form does not guarantee entry to doubles. Both players must sign in in-person as required by the tournament.*

ARE YOU BRINGING A REGISTERED COACH OR ADDITIONAL PERSONS  
(Please Specify)? \_\_\_\_\_

*If a coach, or any other person is accompanying you, please complete a separate form for each person travelling*

*\*Junior players will require the signature of a parent or guardian on the form in order to enter a tournament*

**TRAVEL DETAILS**

**Note: Transport is provided for flights arriving & departing between 9am-11pm.**

I WILL BE ARRIVING BY CAR:  TRAIN:  AEROPLANE:  (Please tick one: **X**)

DATE OF ARRIVAL: \_\_\_\_\_ TIME: \_\_\_\_\_ FLIGHT NO: \_\_\_\_\_ AIRPORT: \_\_\_\_\_

DATE OF DEPARTURE: \_\_\_\_\_ TIME: \_\_\_\_\_ FLIGHT NO: \_\_\_\_\_

NO. OF CHAIRS : \_\_\_\_\_ NO. OF PEOPLE: \_\_\_\_\_ T-SHIRT SIZE: S  M  L  XL

**ACCOMMODATION REQUIREMENTS**

DO YOU REQUIRE ACCOMMODATION: **YES** **NO** EVERY DAY WHEELCHAIR USER: **YES** **NO**

ROOMING PARTNER: \_\_\_\_\_ SPECIAL REQUIREMENTS: \_\_\_\_\_

**ALL PLAYERS MUST AGREE AND SIGN THE FOLLOWING CLAUSE:**

I hereby agree to abide by the ITF Rules of Tennis, the ITF Rules of Wheelchair Tennis and pay the entry fee as required by the tournament. I confirm that I have read and understood Article 24 of the Wheelchair Tennis Rules and Regulations 2015 and further that in accordance with Article 33(k) of the same that I have adequate travel and medical insurance. I further agree to abide by the ITF Code of Conduct in all Main Draw events or by the Code of Conduct adopted by the tournament in any other draws. I also agree for participation in the tournament to be bound by and comply with the all the provisions of the ITF Tennis Anti-Doping Programme 2015. I note that the Tennis Anti-Doping Programme is set out in full on the ITF website ([www.itftennis.com](http://www.itftennis.com)) and in a separate rulebook that is published and distributed to all the National Associations and is also available upon application.

I understand and agree that I have a medically diagnosed permanent physical disability as defined in the Rules of Wheelchair tennis, found at [www.itftennis.com/wheelchair/rules/eligibilityrules.asp](http://www.itftennis.com/wheelchair/rules/eligibilityrules.asp) and that I am eligible to compete in ITF sanctioned wheelchair tennis tournaments. I understand that if requested by the ITF, I am required to supply appropriate medical documentation that substantiates the disability.

**Anti-Corruption**

I am bound by and will comply with the Uniform Tennis Anti-Corruption Program (the "Anti-Corruption Program"), a copy of which is available upon request from the ITF or may be downloaded at <http://www.tennisintegrityunit.com>. The Anti-Corruption Program will govern my participation in ITF-sanctioned events (alongside the ITF Rules, including the Player Code of Conduct and the ITF Tennis Anti-Doping Programme, each of them applying concurrently and without prejudice to the other). The Tennis Integrity Unit may conduct investigations in relation to ITF- sanctioned events under the Anti-Corruption Programme, and will enforce any penalties, sanctions and/or other measures taken against me under the Anti-Corruption Programme. I hereby submit to the jurisdiction and authority of the ITF to manage, administer and enforce the Anti-Corruption Programme and to the jurisdiction and authority of the Court of Arbitration for Sport to determine any appeals brought under the Anti-Corruption Programme.

**Anti-Doping**

I am bound by and will comply with the Tennis Anti-Doping Programme (the "Anti-Doping Programme"), a copy of which is available upon request from the ITF or may be downloaded at <http://www.itftennis.com/anti-doping>. The Anti-Doping Programme will govern my participation in ITF-sanctioned events (together with the ITF Rules, including the Player Code of Conduct and the Uniform Tennis Anti-Corruption Program, each of them applying concurrently and without prejudice to the other). The ITF may conduct anti-doping testing at ITF-sanctioned events under the Anti-Doping Programme, and will enforce any penalties, sanctions and/or other measures taken against me under the Anti-Doping Programme. I hereby submit to the jurisdiction and authority of the ITF to manage, administer and enforce the Anti-Doping Programme and to the jurisdiction and authority of the Anti-Doping Tribunal and the Court of Arbitration for Sport ("CAS") to determine any charges brought under the Anti-Doping Programme.

NAME:(Block) \_\_\_\_\_ SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR JUNIORS ONLY:**

GUARDIAN'S  
NAME:(Block) \_\_\_\_\_ SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_