

# ITF WHEELCHAIR TENNIS TOUR 2019 INTERNATIONAL ENTRY FORM

%Please type and send to iizukajapanopen@gmail.com by email.

TOURNAMENT NAME	Japan Open 2019						
NATION	JAP	AN	DATES	23-28	April 2019		
(Please tick ✔) PLAYERS NAME SUPPORTERS NAME (Coach/Family/Others)						] FEMALE	
NATIONALITY	IPIN REGISTRATION NO						
BIRTHDATE	TEL						
	CEL						
PASSPORT NO							
TENNIS INFORMATION		NB	: All players mu	st have adequ	ate travel and healt	h insurance.	
MEN: WO	DMEN:	QUAD:	]				
ARE YOU APPLYING FOR	R A WILD CARE	INTO THE N	IAIN OR SECON	ID DRAW?	MAIN: SEC	OND:	
DO YOU WISH TO APPLY	TO USE YOUR	R FEED UP C	ARD AT THIS TO	OURNAMENT?	YES	NO	
AT WHICH TOURNAMEN		YOUR FEEI	OUP CARD?				
DO YOU INTEND TO PLA	Y DOUBLES?	YES	NO				
NB. This form does not guara	ntee entry to doul	oles. Both play					
ARE YOU BRINGING A RI (Please Specify)?	EGISTERED CO	DACH OR AD	DITIONAL PERS	SONS			
If a coach, or any other person *Junior players will require the							
TRAVEL DETAILS	Note	Transport is	s provided for fli	ghts arriving 8	& departing betwee	n 9am-11pm.	
I WILL BE ARRIVING BY	CAR:	TRAIN:	AEROF	PLANE:	(Please ti	ck one: <b>X</b> )	
DATE OF ARRIVAL:		TIME:	FLIG	HT NO:	AIRPORT:		
DATE OF DEPARTURE:		TIME:	FLIG	HT NO:	-		
NO. OF CHAIRS :	NO. OF	PEOPLE:					
%Please be sure to apply t %The number of wheelcha		s you are a w	heelchair user.				

% If you book the flights from/to Tokyo, Haneda route is more convenient, not Narita route.

### ACCOMMODATION REQUIREMENTS

DO YOU REQUIRE ACCOMMODATION:		NO	EVERY DA	Y WHEELCHAIR USER:	YES	NO
<ul> <li>Nogami President Hotel _ Single R</li> <li>Chikuho Heights Hotel</li> <li>ROOMING PARTNER:</li></ul>	oom	□ Shar	ed (Twin) Room	Note: Due to the limited availability, there is a po we might not be able to request.	ssibility	

## 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. Further that in accordance with the Wheelchair Tennis Rules and Regulations 2019 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 2019. I note that the Tennis Anti-Doping Programme is set out in full on the ITF website (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, 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 Tennis Anti-Corruption Program (the "TACP"), a copy of which is available upon request from the ITF or may be downloaded at http://www.tennisintegrityunit.com/. I acknowledge that I have received and had the opportunity to review the TACP, and that I understand its provisions. I acknowledge that I have a duty to inform my Related Persons (as defined in the TACP) of the provisions of the TACP and to instruct them to comply with the TACP. I accept that I must complete any Tennis Integrity education programs mandated by the ITF. The TACP prohibits certain conduct by me and my Related Persons, including, but not limited to, (i) wagering on any tennis match, (ii) contriving or attempting to contrive the outcome of any tennis match, (iii) receiving or providing consideration in exchange for Inside Information (as defined in the TACP), (iv) soliciting or facilitating any other person to wager on a tennis match, and (v) failing to report any knowledge I may have regarding potential violations of the TACP. I acknowledge that I have an obligation to report any corrupt approaches that I may receive and any known or suspected offenses by others to the TIU as soon as possible. I accept that I must cooperate fully with investigations and shall not tamper with or destroy any evidence.

#### 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 AntiCorruption 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.

IAME:(Block)	SIGNED:	DATE:
OR JUNIORS ONLY: BURDIAN'S NAME:(Block)	SIGNED:	DATE: