

ITF WHEELCHAIR TENNIS TOUR 2020 INTERNATIONAL ENTRY FORM

₩Р1 :: : 1 c:11 . . . 6 1 : 1

TOURNAMENT NAME	Japan Open	2020					
NATION Ja	pan		DATES	21-26 April	2020		
(Please tick) DPLAYERS NAME SUPPORTERS NAME (Coach/Family/Others)							
NATIONALITY	тү			IPIN REGISTRATION NO			
PLAYER SPORT CLASS (OPEN/QUAD)	;						
PLAYER SPORT CLASS STATUS							
BIRTHDATE			TE				
	PASSPPORT NUMBER						
TENNIS INFORMATION		NB: A	ll players m	iust have adequ	ate travel and health insurance.		
MEN: W	OMEN:	QUAD:		JUNIOR*:			
ARE YOU APPLYING FO	R A WILD CARE	INTO THE MAI	N OR SECO	ND DRAW?	MAIN: SECOND:		
DO YOU WISH TO APPL	Y TO USE YOUF	R FEED UP CAR	RD AT THIS	TOURNAMENT	? YES NO		
AT WHICH TOURNAMEN		I YOUR FEED U	IP CARD?				
DO YOU INTEND TO PLA NB. This form does not guard		YES NO					
ARE YOU BRINGING A F	EGISTERED CO	DACH OR ADDI	TIONAL PE	RSONS			
(Please Specify)? If a coach, or any other per *Junior players will require the							
TRAVEL DETAILS	Note	: Transport is p	rovided for	flights arriving	& departing between 9am-11pm.		
I WILL BE ARRIVING BY	CAR:	TRAIN:	AER	OPLANE:	(Please tick one: X)		
DATE OF ARRIVAL:		TIME:	FLI	GHT NO:	AIRPORT:		
DATE OF DEPARTURE:		TIME:	FLI	GHT NO:			
NO. OF CHAIRS :	NO. OF	PEOPLE:					

*Please refer the airlines that you are a wheelchair user.

*The numbers of wheelchair is restricted.

X If you book the flights from/to Tokyo, Haneda route is more convenient, than Narita route.

ACCOMMODATION REQUIREMENTS

DO YOU REQUIRE ACCOMMODATION:

EVERY DAY WHEELCHAIR USER: YES

S NO

□ THE Retreat Hotel (former site of Chikuho Heights)

□Single Use □Shared Room (by Two) □Shared Room (by Three) □Shared Room (by Four) ※Up to two Wheelchair Users can be accommodated in any room.

NO

YES

Please refer to the Japan Open 2020 guideline.

□ Nogami President Hotel □Single Room □Shared (Twin) Room

ROOMING PARTNER: _____

SPECIAL REQUIREMENT:

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 2020 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 2020. 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 am bound by and will comply with the ITF Wheelchair Tennis Classification Rules, a copy of which is available on request from the ITF or may be downloaded at https://www.itftennis.com/wheelchair/classification/classification.aspx.

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 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: