

CPISTRA Football 7-a-side World Championships

CPISTRA Football 7-A-Side World Championships

Rio de Janeiro, Brazil 2007
November 03rd - 18th



Av.: Almirante Barroso, 06 - 501/502 - Centro - Rio de Janeiro - CEP.: 20031-000

Tels.: 55 21 2220-1314 - 55 21 2220-1914

www.ande.org.br

CPISTRA Football 7-a-side World Championships

Invitation to the Nations

July 31st, 2007.

Dear Sirs and Madams,

Today the Brazilian Paralympic movement is living a very special moment. We are getting ready to host two of the biggest events in this year parasports' calendar, the 3rd IBSA World Championships and Games in São Paulo and the ParaPan-American Games here in our hometown, Rio de Janeiro.

Anticipating the games in Rio are the Pan-American Games that put the city in a true sporting fever. Our expectations are very high; all eyes are focused on these events. Everybody here is giving their most and best to guarantee the success of these 3 events.

We, the OC of the 2007 CPISTRA Football 7-a-side World Championships will be using some of the infrastructure left from the Parapan-am Games. The Deodoro Sports Complex, which will host some sports of the Panam Games, will be our main competition venue. And a beautiful one it is!

Please check our website (www.ande.org.br/cpisrafut7) for all information regarding the championships as: accommodation, transportation, competition ground, entries, the city, classification procedures and many more.

We wish you all the best for your on going preparations, we they are coming along just fine and that your squads are being well prepared. Brazil and Rio de Janeiro will be awaiting you in November and wish your country success and victories for the 2007 CPISTRA Football 7-a-side World Championships!

Kindest Regards,

Prof. Ivaldo Brandão Vieira
President of the HOC

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1) INTRODUCTION

The CPISTRA Football 7-A-Side World Championships will be held in the city of Rio de Janeiro from November 03rd - 18th, 2007. The major competition venue will be the Deodoro Sports Complex

The event happens every four years on behalf of the CPISTRA (Cerebral Palsy International Sports and Recreation Association) will be organised by the Brazilian Association of Disability Sports (ANDE). Offering the best in terms of organisation, the Organising Committee (HOC) of the games is comprised of major names involved in Olympics and Paralympics sports as well as well known specialised event promoters.

Besides, the Championships will be supported by the Municipal, State and Federal Governments; which will guarantee an efficient and competent network aiming at organising an event that has everything to become part both national and international Parasports history.

We are absolutely sure of the success of these Championships since besides the fact of being the second most important event in the Football 7-a-side Sport; it will be supported and organised by important areas connected to the social work, aiming at the inclusion of handicapped persons all over the world.

2) ENTRY CRITERIA

Entry to CPISTRA Football 7-A-Side World Championships is through the qualification criteria established by CPISTRA.

All participants must be members at CPISTRA and be fully up to date with their membership fees and in good standing.

The qualification criteria is posted on the CPISTRA website: www.cpisra.org

3) RIO DE JANEIRO

THE CITY

One of the major economic and cultural hubs of South America, the City of Rio de Janeiro sits at the heart of the South-eastern Region. A cosmopolitan city, known worldwide for its scenic beauty and its natural resources, the city provides a harmonious and agreeable environment for its inhabitants and visitors, for both leisure and work.

The City of Rio de Janeiro receives annually more than 2 million foreign tourists, which according to EMBRATUR makes it the most visited city in the country, with an approximate share of 33% of the total number of foreign tourists. Added to this, more than 5 million Brazilian tourists visit the city every year. With its wide infrastructure of tourism services, Rio de Janeiro is ranked among the top destinations in the world in reception for cultural, commercial, technical and scientific events – fairs, symposia, congresses, conventions and exhibitions. Its exuberant natural resources include 90 Km of beaches, the Tijuca National Park, which includes the largest urban forest in the world, with 3,200 ha of Atlantic Forest.

In Rio de Janeiro, the sun shines around 250 days a year. In the summer the thermometers can get up to 104°

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Fahrenheit or more, but at other times of the year the weather is much cooler.

Very few cities in the world can offer visitors such a huge variety of natural beauty as Rio de Janeiro. The splendour of its coastline and the green of its mountains and forests have been preserved, despite urban growth, and the combination of the blue from the sky and the sea along with the green from the forests is unique.

4) BRAZIL CUSTOMS

➤ Visitor's baggage:

The definition of personal baggage for purposes of exemption of duties applies only to the traveller's personal items, including clothing, books/magazines, and other objects for personal use, in quantity and quality compatible with the duration and purpose of the traveller's trip.

New items will be exempt from duties, if their total value does not exceed US\$500.00 (for flight or maritime arrivals) or US\$1500.00 (for land or fluvial arrivals). For multiple visits, a 30-day interval between trips is required for renewed exemption. Import duty will apply to items exceeding the US\$500.00/1500.00 ceiling.

The arriving visitor will be allowed to buy up to US\$500.00 of tax exempt goods per person at the port of entry's free shop, exclusively at his/her arrival. For multiple visits, a 30-day interval between trips is required for renewed exemption.

➤ Temporary admissions:

The temporary admission regime allows for traveller's baggage (goods for personal or professional use, including motor vehicles, filming cameras, notebooks and similar equipment, sports equipment) to enter Brazil for a specified period and with no duties (suspended taxation), provided these items are not to be sold or industrially processed in Brazil. Unaccompanied luggage must be covered by a cargo bill.

Customs clearance is done at the port of entrance, requiring a declaration ("Termo de Responsabilidade") signed by the traveller (complete identification must be provided: name in full, passport number, address, profession, travel itinerary in Brazil), by which he/she will take responsibility for removing the goods from Brazil, once he/she leaves the country.

An itemized list of the goods (complete description, including, as applicable, motor number, make, year, model, serial number and manufacturer; quantity; value for customs purposes in US\$ dollars) is required when applying for the temporary admission regime. If not in Portuguese, customs authorities may require to have the list translated into Portuguese by a Public Translator ("Tradutor Juramentado").

The traveller must offer proof of his/her status as a resident of a foreign country (the document may be authenticated by the Consular Service) and of ownership of the goods.

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5) OFFICIAL HOTELS

Leme Othon Palace

Av. Atlântica, 656 - Leme - Rio de Janeiro
Tel. (21) 2122-5900

Tucked between the sea and the mountains, the Leme Othon Palace hotel offers top-quality service with spacious, comfortable rooms and suites, plus a modern Convention Center and smaller break-out meeting rooms. A favorite with visiting executives, it is just fifteen minutes by car from Downtown and the Santos Dumont shuttle airport. The windows of the Leme Othon Palace offer magnificent views over Leme and Copacabana beaches, which together feature eight kilometers of irresistibly-inviting white sand framed by a blue sea. Just a few steps away from the hotel is the imposing Leme Peak, jutting out into the sea and where a trail known as the Fishermen's Walkway (Caminho dos Pescadores) is among the best places to admire the beautiful sunsets of Rio.

6) VENUE

All games will be held at the Deodoro Military Center, which is also going to be the official venue for football 7-a-side competition of the Parapan-American Games Rio 2007. The sports complex is located about 25 minutes away from Copacabana, where Game's HQ will be located, and will certainly guarantee comfort and hospitality for your NPC during the event.

Please look for pictures in our homepage.

7) PITCH

We will once again be using the same material that will be used during the Pan- and Parapan-american Games, for Hockey and football 7-a-side events. The surface is of artificial grass used in hockey games, very light and swift. Please be sure to bring adequate sporting material, you will not be allowed to use studs on this pitch.

8) VISAS

Citizens of the following countries do not require a visa to visit Brazil, provided the stay does not exceed 90 days.

- Argentina
- England
- Ireland
- The Netherlands
- Scotland
- Spain

Teams from countries **not listed** above should get in touch with the Brazilian embassy or consulate where they will be applying for a visa.

For additional information, check on <http://www.braziltourism.org/visas.shtml>

➤ Vaccinations

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International travel and health is a WHO guide that offers guidance on the full range of health risks likely to be encountered at specific destinations and associated with different types of travel – from business, humanitarian and leisure travel to backpacking and adventure tours.

Please visit: <http://www.who.int>

- Recommended vaccinations, protection and safety.

Please visit: <http://www.anvisa.gov.br>

9) TIMETABLES

Delegations should email or fax the forms according to the following deadlines:

Date	Item(s)	Item(s) description
January 11 th , 2007	- Organizing Committee will send email with information's	Demonstration of interest <ul style="list-style-type: none"> ▪ Estimated Number of Participants ▪ Contact information for participating country
February 02 rd , 2007	- Countries shall submit information to the HOC.	\$ 1,000.00 in US Dollars Deposit Non-Refundable Deposit Fee
March 16 th , 2007	- Organizing Committee will send email with information's	- First Entry Form and First Fee Form - Football(Soccer) Entry Form
May 11 th , 2007	- Countries shall submit all information to the HOC.	- Form with first 50% of total amount entry fee. -- Football(Soccer) Entry Form
July 31 st , 2007	- Organizing Committee will send email with information's	- Team Members Profile - Term of Acceptance of Rules and Regulations - Medical Declaration - Hotel Rooms Form - Arrival and Departure Form - TUE and TUEC
August 31 st , 2007	- Final Entry Fee Form	- Final Entry Fee Transfer form with the remaining 50% - All documents
September 15 th , 2007	- Event Confirmation to Countries	- Organizing Committee will send email confirming to the athlete all information on the event

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10) PAYMENTS

All fees should be paid ASAP due to the limited time the HOC has to finalize the organization for the Championship.

- ▶ **Inscription = US\$ 1.200,00** (One Thousand and two hundred american dollars) per person.

Each country has already forwarded a non-refundable deposit fee of US\$1,000.00 for their team, which will not be included in your total payment.

The Entry Fees should be fully paid, therefore, bank fees or anything related to international transfers shall be reimbursed to the HOC until the end of the final deadline, debts and fees that have not been paid will not make the check-in in the hotels and participation of the events effective.

Please note that every delegation is composed by 16 members. Extra members will be treated as a normal member of your delegation, but the NPC will be charged an additional U\$ 300,00 for each extra person to the initial entry fee..

11) DEADLINES

- ▶ The total amount of the entry fees per participant shall be made on the following dates:
 - **Final Entry Fee Form: August 31st , 2007**

NOTE: THERE WILL BE A U\$ 50,00 LATE ENTRY FEE PER PERSON FOR EACH MISSED DEADLINE.

The OC of the CPISRA Football 7-A-Side World Championships RIO 2007 informs that the entry fee covers the following:

- ▶ Accommodation for 14 nights on a share twin basis, in Copacabana beach.
- ▶ All meals from dinner on 3rd October to breakfast on 18th October.
- ▶ All transport in Rio de Janeiro for competition, functions and ceremonies.
- ▶ Entry to all functions and ceremonies.
- ▶ The CP-ISRA capitation fee.

This does not include:

- ▶ Meals other than those provided by the Organising Committee.
- ▶ Airfares and departure taxes.
- ▶ Personal expenses such as telephone calls, laundry, room service, minibar.

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12) BANK DETAILS

Payments, including the non-refundable holding deposit of US\$1.000, 00 per team, should be made c/o of ANDE, the National Disability Sports Association, located at Avenida Almirante Barroso nº 06, salas 501 e 502, Rio de Janeiro - RJ - Brasil - 20.031-000. Below you will find Banking information:

Bank: **Banco do Brasil**

SWIFT CODE: **BRASBRRJRJO**

IBAN: **001 03921 0000 360929**

(Bank No - 001 / Branch No - 0392-1 Account No – 36092-9)

Address: **Prof. Lélío Gama, 105 – 5º Andar – Centro – Rio de Janeiro, CEP- 20.031- 080 – Brasil.**

OR:

Fill in field 59 (maybe the field you have is a different one) with the

Following codes: **Field 59: //001 03921 0000 360929**

Bank: **Banco do Brasil**

This payment can be made through any of Banco do Brasil's international branches or via any bank with currency exchange services.

13)INSURANCE

Each team must arrange adequate personal and medical insurance to cover any loss of property, injuries, medical treatment or hospitalisation.

The CPISRA Football 7-A-Side World Championships Host Organising Committee, its officers, agents and members are not responsible for any claims, costs, proceedings and damage whosoever and howsoever arising directly or indirectly out of or in connection with participation in the Championship or provision by the CPISRA Football 7-A-Side World Championships RIO 2007 Host Organising Committee.

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14) COMPETITION SCHEDULE

CPISTRA 7-A-Side Football World Championships RIO 2007																
	November 2007															
	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18
Arrival of teams and accreditation	X															
Classification / training		X	X													
Opening Ceremony			X													
Competition				X	X	X	X	X	X	X	X	X				
Finals													X	X	X	
Medal Ceremony															X	
Closing Ceremony															X	
Departures																X

15) TECHNICAL INFORMATION

The keys will be drawn during the III Parapan-American Games Rio 2007, from August 12th to 19th. All outstanding technical information will be notified directly afterwards.

16) CLASSIFICATION

The classification coordinator for the competition is CPISTRA chief classifier Terrie Moore.

Two classification panels will be appointed for the competition.

Teams will receive a tentative classification evaluation schedule prior to the competition. Times will be schedule in accordance with arrival times and practice times but any possible conflict should be reported to the classification coordinator. Social events will not be considered as a conflict.

Athletes who are not 15 years of age as of January 1st, 2007, will not be classified and will not be eligible to compete.

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1. Athletes must come for classification at the schedule time with:
 - The appropriate equipments including shorts, game shoes, t-shirts and any other piece of equipment they use during competition, especially for goal keepers.
 - Passport.
 - List of medication.
 - Information on their disability in english.
 - Signed classification informed consent form.
 - Cpisra classification identification card.
2. One person may accompany athletes from their national federation. A translator may also accompany the athlete if approved by the classification coordinator.

Athletes without CPISTRA classification identification cards will be asked to come to the classification area at an assigned time to receive their CPISTRA classification identification card (assigned times will be given to the team managers). Athletes must bring their passport with them at this time.

Classification protest:

As per the CPISTRA classification and sports rule manual 9th edition.

If the athlete does not agree with their classification after the initial evaluation they have sixty (60) minutes to protest the sport class they have been assigned.

Other countries may protest an athlete's classification within sixty (60) minutes of the athlete's first appearance during the competition.

Classification protest form will be available from the classification coordinator.

The protest forms are to be given to the classification coordinator or their designate within sixty (60) minutes. The protest fee of €100.00 (one hundred Euros) must be accompanying the protest form. If the protest decision confirms the sports class allocation, the fee will not be returned. The protest form will also act as a receipt for the protest fee.

Not eligible to compete:

As per the cpisra classification and sports rule manual 9th edition:

3.6.2 if a classification team finds that the athlete does not meet the minimum criteria or diagnosis for classification (as outlined in section 5), the athlete is not eligible to compete in cpisra events (ne). If the classification panel determines that the athlete is ne, the classification review team will automatically examine the athlete. If the classification review panel confirms that the athlete is ne, the athlete will not be permitted to compete.

If, during the classification process, an athlete's classification is charged so that there are now 4 (four) athletes from the same country with the same classification, the technical delegate will be notified.

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17) ANTI-DOPING CONTROL

THERAPEUTIC USE EXEMPTION (TUE) APPLICATION & NOTIFICATION FORM
FOR CP-ISRA / IBC / IPC OFFICIAL AND SANCTIONED EVENTS

INSTRUCTIONS

- PLEASE READ SECTION 6 (IPC ANTI-DOPING CODE) CAREFULLY PRIOR TO COMPLETING THIS FORM
- TYPE INFORMATION OR WRITE LEGIBLY IN BLOCK LETTERS USING BLACK INK IN ENGLISH
- LEAVE NO BLANKS AND ANSWER ALL QUESTIONS
- SECTION 1 MUST BE COMPLETED BY THE ATHLETE APPLYING FOR A THERAPEUTIC USE EXEMPTION (TUE)
- SECTIONS 2, 3 & 4 MUST BE COMPLETED BY THE ATHLETE'S MEDICAL PRACTITIONER
- SECTION 5 MUST BE SIGNED BY THE ATHLETE AND THE ATHLETE'S MEDICAL PRACTITIONER
- SECTION 6 MUST BE COMPLETED AND SIGNED BY THE MEDICAL OFFICER/MEDICAL REPRESENTATIVE OF THE CP-ISRA NATIONAL MEMBER ORGANISATION
- COMPLETED TUE APPLICATIONS & NOTIFICATION FORMS SHOULD BE SENT BY THE CP-ISRA NATIONAL MEMBER ORGANISATION TO:

DR HALIM JEBALI
ANTI-DOPING SUBCOMMITTEE CHAIRPERSON
SPORT TECHNICAL COMMITTEE
CP-ISRA
4 AVENUE DE LA LIGUE ARABE, 1002 TUNIS
TUNISIA
EMAIL: HALIM.JEBALI@PLANET.TN

HOC DOPPING CONTROL
DR AGNALDO BERTTUCI
AVENIDA ALMIRANTE BARROSO Nº 06, SALAS 501 E 502, RIO DE JANEIRO - RJ - BRASIL -
20.031-000
TEL.: 55 21 2220 1314
EMAIL.: HOCRIO2007-AND@RJNET.COM.BR

INCOMPLETE TUE APPLICATIONS & NOTIFICATION FORMS WILL NOT BE CONSIDERED AND
WILL BE RETURNED TO THE NATIONAL MEMBER ORGANISATION

*THE CORRECT FULFILLING OF THE INFORMATION AND THE VERACITY OF THE DATA IN
THE FORMS ARE TOTAL RESPONSIBILITY OF THE ATHLETES AND COUNTRIES ENTERING
THE EVENT. THE HOC WILL NOT BE RESPONSIBLE FOR MISSING INFORMATION.*

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CP-ISRA THERAPEUTIC USE EXEMPTION APPLICATION & NOTIFICATION FORM

1. ATHLETE INFORMATION

I apply for approval from the CP-ISRA / IBC for the therapeutic use of a prohibited substance on the World Anti-Doping Code Prohibited List	<input type="checkbox"/>
I notify the CP-ISRA / IBC of the use of beta-2-agonists by inhalation or glucocorticosteroids by non-systemic routes	<input type="checkbox"/>

Family Name: _____	Given Names: _____
Male <input type="checkbox"/>	Female <input type="checkbox"/>
Address: _____	
City: _____	Postcode: _____
Country: _____	
Date of Birth (dd/mm/yy) _____ / _____ / _____	
Sport: 7-a-side Football	
Sport Class(es): _____	
Type of Disability: Cerebral Palsy <input type="checkbox"/>	
If other, please Specify _____	
Duration of Disability: _____ / _____	
Years Months	

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2. NOTIFYING MEDICAL PRACTITIONER

NAME, QUALIFICATION & MEDICAL SPECIALITY (*SEE NOTE 1*):

ADDRESS: _____

CITY: _____ POSTCODE: _____

COUNTRY: _____

EMAIL _____

ADDRESS _____

TEL. WORK: _____ TEL. HOME: _____

MOBILE: _____ FAX: _____

3. MEDICATION DETAILS

ENSURE ONLY SUBSTANCES ON THE WORLD ANTI-DOPING CODE PROHIBITED LIST ARE DETAILED IN THIS SECTION (*SEE NOTE 2*):

COMMERCIAL NAME	GENERIC NAME	DOSE OF ADMINISTRATION	ROUTE OF ADMINISTRATION	FREQUENCY OF ADMINISTRATION
1.				
2.				
3.				
<i>ANTICIPATED DURATION OF THE ABOVE MEDICATION</i>				

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DIAGNOSIS OF ATHLETE (*SEE NOTE 3*):

ENTER REASONS FOR NOT PRESCRIBING ALTERNATIVE THERAPIES; IF APPROPRIATE (*SEE NOTE 4*):

4. ADDITIONAL INFORMATION

PROVIDE EVIDENCE TO SUBSTANTIATE THE DIAGNOSIS AND THE NECESSITY TO USE SUBSTANCES ON THE WORLD ANTI-DOPING CODE PROHIBITED LIST (*SEE NOTES 3 & 4*). ATTACH ADDITIONAL INFORMATION WHERE NECESSARY.

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5. MEDICAL PRACTITIONER & ATHLETE DECLARATION

I, _____ CERTIFY THE ABOVE-MENTIONED SUBSTANCE/S FOR THE ABOVE-NAMED ATHLETE HAS BEEN/ARE TO BE ADMINISTERED AS THE CORRECT TREATMENT FOR THE ABOVE NAMED MEDICAL CONDITION.

SIGNATURE _____ OF _____ MEDICAL PRACTITIONER: _____

DATE: _____

I, _____ CERTIFY THAT THE INFORMATION DETAILED IN SECTION 1. IS ACCURATE AND THAT I AM REQUESTING APPROVAL TO USE A SUBSTANCE OR METHOD FROM WORLD ANTI-DOPING CODE PROHIBITED LIST. I AUTHORIZE THE RELEASE OF PERSONAL MEDICAL INFORMATION TO THE ANTI-DOPING ORGANISATION AS WELL AS TO WADA STAFF AND TO THE WADA TUEC (THERAPEUTIC USE EXEMPTION COMMITTEE) UNDER THE PROVISION OF THE CP-ISRA ANTI-DOPING CODE. I UNDERSTAND THAT IF I EVER WISH TO REVOKE THE RIGHT OF THE CP-ISRA TUEC OR WADA TUEC TO OBTAIN MY HEALTH INFORMATION ON MY BEHALF, I MUST NOTIFY MY MEDICAL PRACTITIONER IN WRITING OF THAT FACT.

SIGNATURE _____ OF _____ ATHLETE: _____

DATE: _____

SIGNATURE _____ OF _____ PARENT/GUARDIAN*: _____

DATE: _____

(*IF THE ATHLETE IS A MINOR OR HAS A DISABILITY PREVENTING HIM/HER TO SIGN THIS FORM, A PARENT OR GUARDIAN SHALL SIGN TOGETHER WITH OR ON BEHALF OF THE ATHLETE)

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6. CP-ISRA NATIONAL MEMBER ORGANISATION DETAILS

ALL CORRESPONDENCE RELATING TO THIS TUE APPLICATION WILL BE DIRECTED TO THE DOPING CONTROL/MEDICAL OFFICER OF THE CP-ISRA NATIONAL MEMBER ORGANISATION AS DETAILED BELOW (*SEE NOTE 5*):

CP-ISRA DOPING CONTROL / MEDICAL OFFICER:

NAME

SIGNATURE *DATE*

TEL: _____ FAX: _____

7. NOTES

NOTE 1	<i>NAME, QUALIFICATIONS & MEDICAL SPECIALITY</i> FOR EXAMPLE: DR AB COOK, MD FRACP, GASTRO-ENTEROLOGIST.....
NOTE 2	<i>MEDICATION DETAILS</i> PROVIDE DETAILS CONCERNING THE SUBSTANCE(S) ON THE WORLD ANTI-DOPING CODE PROHIBITED LIST FOR WHICH APPROVAL IS SOUGHT. USE GENERIC NAMES (INN) AS WELL AS COMMERCIAL NAMES AND SPECIFY MEDICATION DOSE.
NOTE 3	<i>DIAGNOSIS</i> EVIDENCE CONFIRMING THE DIAGNOSIS MUST BE ATTACHED AND FORWARDED WITH THIS APPLICATION AND MUST BE IN ENGLISH. THE MEDICAL EVIDENCE SHOULD INCLUDE A COMPREHENSIVE MEDICAL HISTORY AND THE RESULTS OF ALL RELEVANT EXAMINATIONS, LABORATORY INVESTIGATIONS AND IMAGING STUDIES. COPIES OF THE ORIGINAL REPORTS OR LETTERS SHOULD BE INCLUDED WHERE POSSIBLE. EVIDENCE SHOULD BE AS OBJECTIVE AS POSSIBLE IN THE CLINICAL CIRCUMSTANCES AND IN THE CASE OF NON-DEMONSTRABLE CONDITIONS INDEPENDENT SUPPORTING MEDICAL OPINION WILL ASSIST THIS APPLICATION.
NOTE 4	<i>MEDICAL EVIDENCE</i> IF A PERMITTED MEDICATION CAN BE USED IN THE TREATMENT OF THE ATHLETE'S MEDICAL CONDITION, PLEASE PROVIDE CLINICAL JUSTIFICATION FOR THE REQUESTED USE OF THE SUBSTANCE(S) ON THE WORLD ANTI-DOPING CODE PROHIBITED LIST.

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NOTE 5	<i>NATIONAL MEDICAL OFFICER</i> ALL APPLICATIONS MUST INCLUDE A STATEMENT BY THE MEDICAL OFFICER OF THE ATHLETE'S NATIONAL ORGANISATION IN MEMBERSHIP WITH CP-ISRA, ATTESTING TO THE NECESSITY OF THE USE OF SUBSTANCE(S) ON THE WORLD ANTI-DOPING CODE PROHIBITED LIST IN THE TREATMENT OF THE ATHLETE.
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8. DECISION (FOR CP-ISRA SECRETARIAT USE ONLY)

APPLICATION COMPLETE: YES <input type="checkbox"/>	NO <input type="checkbox"/>	
APPROVED <input type="checkbox"/>	NOT APPROVED <input type="checkbox"/>	INCORRECT TUE <input type="checkbox"/>
NAME OF CP-ISRA TUE COMMITTEE CHAIRPERSON:		
<hr/>		
SIGNATURE OF CP-ISRA COMMITTEE CHAIRPERSON:		
<hr/>		
DATE: <hr/>		
COMMENTS: <hr/>		
DATE DETAIL PASSED TO IPC AND/OR WADA		

THE OC OF THE WORLD CHAMPIONSHIP ADVISE ALL NATIONS THAT, IN ACCORDANCE WITH THE CP-ISRA ANTI-DOPING POLICY, DRUG TESTING WILL TAKE PLACE DURING THE CPISRA FOOTBALL 7-A-SIDE WORLD CHAMPIONSHIPS, FOLLOWING THE WADA RULES AND REGULATIONS.

IT IS A REQUIREMENT FOR PARTICIPATION AT THE EVENT THAT EACH COMPETITOR UNDERTAKES, IF SELECTED, TO COMPLY WITH ANTI-DOPING REGULATIONS AND COOPERATE AND BE AVAILABLE FOR TESTING

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FINAL ENTRY FORM

Country:	CPIRSA Football 7-A-Side World Championships OC use only
Contact Person:	_____
Organisation:	_____
Address:	_____
Email:	_____
Phone N°:	_____ Fax: _____

Athletes Information:

N°.	Name	Birth date	Class
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Teams can change their athletes if necessary until the last deadline for Entries,

Please return this form until latest August 31st, 2007.
Phone N°: 55 21 2220-1314 Fax: 55 21 2220-1914
Emails: footballrio2007-and@rjnet.com.br or hocrio2007-and@rjnet.com.br

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TEAM MEMBER PROFILE

Please complete a form for each TEAM MEMBER

Country: _____				
Member Organization: _____				
DETAILS				
Please circle appropriate category: Athlete Coach Staff Other:				
First Name: _____		Family Name: _____		
Address: _____				
Phone N°: _____				
Email: _____				
Wheelchair User:	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Manual: <input type="checkbox"/>	Electric: <input type="checkbox"/>
Classification Card :		Date of birth: _____		
Class: please leave in blank if no international classification				
CP5	CP6	CP7	CP8	
Dietary Requirements				
Please specify any special requirements, e.g. vegetarian, El halal, Kosher meals, etc. Reminder: Special diets may increase costs				
PASSPORT SIZE PICTURE				
Colour or black & white: 5 x 7 cm		photo		

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 Emails: footballrio2007-and@rjnet.com.br or hocio2007-and@rjnet.com.br

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CPISTRA Football 7-a-side World Championships

TERM OF ACCEPTANCE OF RULES AND REGULATIONS

Country:	CPISTRA Football 7-A-Side World Championships OC use only
Contact Person:	_____
Organisation:	_____
Address:	_____ _____
Email:	_____
Phone Nº:	_____ Fax: _____

On behalf of the Member Organization above, I hereby state that we have read the attached sport specific competition detail, understand the eligibility criteria laid down and accept the rules and regulations of the CPISTRA Football 7-a-side World Championships 2007

Athletes and the national delegation must obey the Rules, Regulations and the Code of Conduct of the games. The OC of the games must report any breaking of such rules to the Executive Board of CP-ISRA.

The CP-ISRA Executive Board must take every violation into consideration and apply the required disciplinary measures whenever necessary.

Organisation stamp

Date:	_____
Position:	_____
Contact Person:	_____
Signature:	_____

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CPISTRA Football 7-a-side World Championships

MEDICAL DECLARATION

Each competitor must fill in this form

Country:	CPISTRA Football 7-A-Side World Championships OC use only
Organisation:	_____

EXPLANATION

For an athlete to be eligible to compete in CP-ISRA competitions all associated medical conditions must be declared. The athlete must declare:

- ▶ The condition;
- ▶ That adequate management has been undertaken for the condition.

This is to allow adequate safety procedures and protocols to be observed, to ensure no detriment to the athlete and other competing athletes. These conditions include but are not limited to asthma, seizures, epilepsy, low blood pressure and a tendency to hyperventilate.

Failure to declare an existing condition and to declare that the necessary management has been undertaken will result in ineligibility for competition. The following is a declaration by the athlete and personal/team doctor that the competitor has stated all know medical conditions and management of same.

I _____
(PLEASE PRINT FULL NAME)

Wish to compete in the CPISTRA Football 7-A-Side World Championships. I understand that the CP-ISRA requires me to state any medical conditions that may compromise my safety in competition in any sport I compete in. I understand that I must state the current management for my condition(s). (please print n/a if there are no associated medical conditions)

I suffer from _____

The current management for the above is _____

Name:

I understand that if I fail to state any conditions that I am known to suffer from and if this condition results in the circumstance of compromising my safety I will be deemed ineligible for further competition at the Championship and indemnify CP-ISRA against any legal ramifications resulting.

_____ Signature of competitor	_____ Signature of parent / guardian / ward If under 18 years
_____ Signature of doctor/team physician	_____ Date

This form is to be resubmitted if there are changes to the condition and medication and/or management

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CPIRSA Football 7-a-side World Championships

HOTEL ROOMS FORM

Country: _____	CPIRSA Football 7-A-Side World Championships OC use only
Contact Person: _____	
Organisation: _____	
Address: _____	
Email: _____	
Phone Nº: _____	Fax: _____

Obs.: In case there is an odd number in participants from a team, triple rooms will be used to sharing bases. The HOC will charge an extra fee of the team if a single rooms demanded since the Entry Fee includes double rooms' bases.

No	Name	Sharing with	Dates	
			Check in	Check out
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
_____		_____		
Contact person		Signature Contact		

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CPISTRA Football 7-a-side World Championships

FINAL ENTRY FEE FORM

Country:	CPISTRA Football 7-A-Side World Championships OC use only
Contact Person:	_____
Organisation:	_____
Address:	_____ _____
Email:	_____
Phone N°:	_____ Fax: _____

We have read the attached sport specific competition detail and understand the eligibility criteria laid down including the entry fee for the Championship of U\$ 1.200,00 per person which includes the CPISTRA Capitation Fee.. We have transferred our non-refundable deposit of \$US 1000, 00 for our team entry as well as the first 50% of the entry fee and the final entry minus the value of the deposit.

Proof of total payment required together with the Final Entry Forms, Entries without any proof of payment will not be accepted. The exact amount of the entry fees inclusive the transfer & taxes must be paid by the participating country.

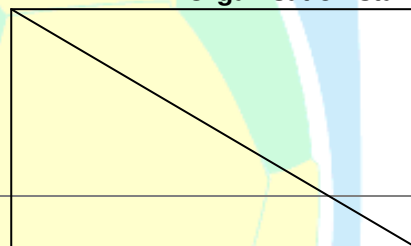
Organisation stamp

Amount of the Final fee: _____

Date of Deposit: _____

Contact Person: _____

Signature: _____



Payments should be made c/o of ANDE, National Disability Sports Association.

The account is at: 001 AG 0392-1

Address: Prof. Lelio Gama 105 5º Andar

Account N°: 360929

Please return this form until latest August 31st, 2007.
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CPIRSA Football 7-a-side World Championships

ARRIVAL AND DEPARTURE FORM

Country:	CPIRSA Football 7-A-Side World Championships OC use only
Contact Person:	_____
Organisation:	_____
Address:	_____
Email:	_____
Phone Nº:	_____ Fax: _____

Travel Details:

CPIRSA Football 7-A-Side World Championships			
	Airline Company	Flight Number	Time
Arrival			
Departure			
	Total	Wheelchair Users	Nº. of Luggage
Number of People			

Type of wheelchair: (Manual:_____, Electric:_____, Size: _____)

Obs: All teams must arrive on the International Airport Galeão / Antônio Carlos Jobim, otherwise the OC of the Championship will not provide the transfer to the hotel.

Contact person **Signature Contact**

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