|  |  |  |
| --- | --- | --- |
| **A blue and white logo  Description automatically generated** | **2025 CMAS European Championships Underwater Rugby** **10th to 15th of November 2025.****Athens (Greece)****(ANNEX 1)****(Before 28th July 2025)** | A blue and white drawing of a person holding a trident and a fish  Description automatically generated |

# **ENTRY FORM**

Please complete this form and send it to the CMAS HQ and the Greek Underwater Sports Federation by e-mail by 28th July 2025. E-mail: info@eoyda.gr (please copy also info@fysalis.com)

|  |  |
| --- | --- |
| **Country:** |  |
| **Federation:** |  |
| **Email** |  |
| **Phone number** |  |
|  | **TOTAL** |
| **Number of Athletes:** | Males: |  | Females: |  |  |
| **Number of Officials:** | Males: |  | Females: |  |  |
| **TOTAL DELEGATION** | Males: |  | Females: |  |  |

**Declaration Form:** By registering my federation in these championships, I undertake to respect the statutes, regulations and directives of the CMAS.

 **Date and Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Insurance:** I hereby declare that all the delegation members have valid health insurance for the duration of their stay. This insurance covers the full extent of the consequences of accidents and reimburses for the costs of treatment and rehabilitation following an accident that may occur during the stay.

 **Date and Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Consent to the publication of imagery:** I grant the Organizing Committee permission for my imagery, full name, nationality, and voice to be recorded during the competition. All team members signed the relevant authorisation form.

 **Date and Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Antidoping:** *this point does not apply to the Visual Championships and competitions.*

* I, the undersigned, am responsible for all the delegation members acknowledging *WADA Antidoping Rules* and *CMAS Antidoping Rules*.
* As a voluntary and mandatory commitment, the athletes must obtain the certificate ADEL (insert link of ADLE) before receiving the CMAS licences according to the relevant point in the CMAS Procedures and Obligations.
* The expenses regarding the controls in competition belong to the organisers. In case of eventual supplementary analysis requested by WADA related to the bio-physiology of an athlete as ex ABP (athlete biological passport), the expenses belong to her/ his national federation.

|  |  |  |
| --- | --- | --- |
| Date | President (Signature / Stamp) | Full Name (in Block Letters) |
|  |  |  |