

IWA-Sport Registration Form



I wish to apply for participant membership of the Irish Wheelchair Association-Sport

Name _____

Address _____

Phone No _____ DOB _____

Email _____

Participant Member:

Volunteer Member

Is there a particular sport that you are interested in?

Archery

Basketball

Bowls

Boccia

Swimming

Field Events

Tennis

Table Tennis

Track & Road racing

Rugby

Cue Sports (Pool)

Other *(please specify)*.....

Do you use a wheelchair? Yes No

Do you have a physical disability? _____

Signature: _____

Date: _____

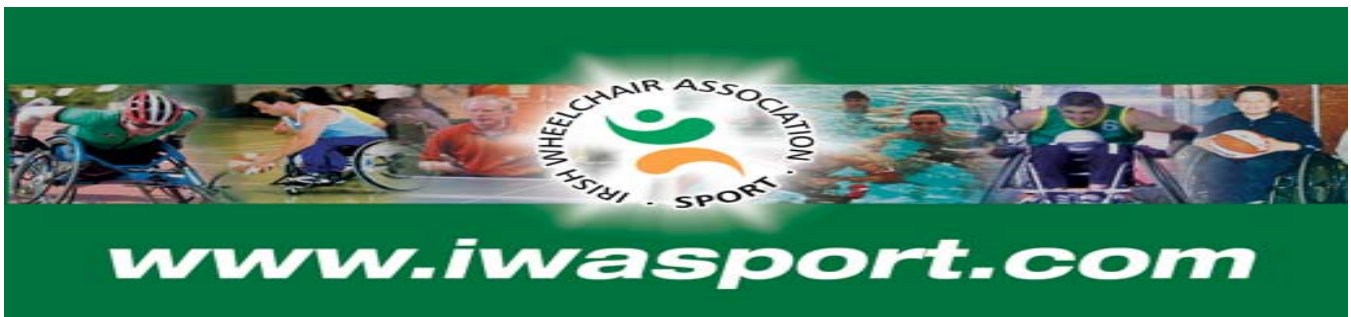
If under 18 years, parent or guardian should sign below

Signature: _____

Date: _____

Completed forms should be returned to

IWA-Sport, Blackheath Drive, Clontarf, Dublin 3. Tel: 01 818 6400 Fax: 01 853 1256 Email: info@iwasport.com



Irish Wheelchair Association-Sport has a code of conduct and adheres to the Irish Sport Council's Code of Ethics and Good Practice for Children in Sport. Members must comply with the Irish Sports Councils Anti-Doping Policy. Copies of these documents are available from the Sports Office.