



ATHLETE DECLARATION FORM

I, _____, am a naturalized citizen of _____.
(Full Name) (Name of Nation)

****Please provide a copy of your passport.***

Age: _____ Birthdate: _____

I am presently residing in the following country: _____.

From: _____ to _____
(Year) (Year or state **permanent** if your there permanently)

****Please provide proof of residency.***

I declare that I will only compete for the nation of: _____

for the following 4 year period: Year _____ to Year _____.

Athlete Signature: _____.

(a digital signature is accepted if the box below is checked)

- * **Important - by submitting my digital signature under penalties of perjury, I certify that:**
1. I am the Athlete
 2. I consent to the use of electronic records.

IF ATHLETE IS UNDER 18 YEARS OF AGE:

Parent or Guardian Signature: _____.

(a digital signature is accepted if the box below is checked)

- * **Important - by submitting my digital signature under penalties of perjury, I certify that:**
1. I am the Parent or Guardian
 2. I consent to the use of electronic records.