

7. I hereby take notice that an extra insurance was proposed to me by FIG and I confirm that I examined the services provided for by the Contract (cf. appendix II of the FIG Licence Rules). I am aware that this extra insurance does not release my Federation or myself from the obligation to take out an insurance as per the Chapter "Financial Provisions" of the Technical Regulations. I also take notice that the FIG is entitled to cancel such insurance at any time upon a 4-month notice.
8. I commit to complete the Athlete Learning Program about Health and Anti-Doping (ALPHA). This is an eLearning program developed by WADA and available on the eLearning platform ADeL (Available on : <https://adel.wada-ama.org>)
9. I have read and understand this Athlete Consent

SIGNATURE OF THE GYMNAST

\_\_\_\_\_

SIGNATURE OF THE LEGAL REPRESENTATIVE  
if the gymnast is a minor

\_\_\_\_\_

Please upload a copy of the valid passport and a color ID picture

The respective national member Federation is fully responsible for all information and documents provided with the application form. The application form must be returned completed, duly signed and stamped by the President or Secretary General of the respective affiliated federation. The application form must be signed by the gymnast. All consent forms from minor applicants, according to the legislation of the applicant's country, must be counter-signed by their legal representative.

PLACE AND DATE

\_\_\_\_\_

SEAL OF THE NF



NF AUTHORISED SIGNATURE

\_\_\_\_\_  
Signature of the NF President or Secretary General

\_\_\_\_\_  
Full name of the NF President or Secretary General