

## FIBA REFEREES' FITNESS TEST / CONSENT FORM

The Internal Regulations of FIBA require all international referees to undertake a physical fitness test. This test is conducted indoors under the supervision of FIBA/FIBA Zone Staff.

The possibility of physical changes occurring during a test of this nature cannot be excluded. These include abnormal blood pressure, fainting, erratic heartbeat and, in extreme cases, heart attack.

Every effort will be made to minimise such occurrences by requesting all participants to present the valid Medical Certificate, signed by a medical doctor, prior to the test.

Note: You should stop the test IMMEDIATELY if you feel tired or ill at any time.

All referees who take the test will be provided with the details of the test and, upon request, can be given advice on training programmes by FIBA Referee Department.

### CONSENT

I have read the contents of this form, the completed Medical Certificate, and the test procedures. I understand the requirements (in particular physical) of the test and I voluntarily consent to participate at my own risk. I hereby agree to hold FIBA/FIBA Zones harmless from/against any and all liabilities, damages, claims, costs and expenses, including (without limitation) reasonable legal fees, that may arise in connection with my participation in the FIBA Referees' Fitness Test.

By participating in the FIBA Referees' Fitness Test, I am deemed by FIBA/FIBA Zones to have secured all necessary insurance coverage to protect me against any and all risks associated to my participation to the FIBA Referees' Fitness Test (in particular health, accident and civil liability insurances).

Date of Fitness Test	Day:	Month:	Year:
Place of Fitness Test			
Name of Referee / Country			
Date and Place			
Signature of Referee			

Note: In case of discrepancy between the three languages: English, Spanish and French, on the meaning or interpretation of a word or phrase, the English text prevails.