

## National Games 25<sup>th</sup> – 27<sup>th</sup> July 2025

### West of Scotland Disability Sports Application Form

**Athlete** – I certify that I am eligible to participate in the Games. I confirm that I have an “intellectual impairment” also known as a Learning Disability.

Please indicate which sport you are applying to participate in \*

**Coach** – Please indicate which sport you are applying for \*

And what if any qualifications you hold in that sport & date \*

I agree to comply with the DSG Code of Conduct, Subgroup of West of Scotland Disability Sport, whilst representing and participating in training or competition.

Athlete/Coach Signature*	Print Name*	Date*
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you are under 18 your parent/guardian must sign.

Parent/Guardian Signature*	Print Name*	Date*
<input type="text"/>	<input type="text"/>	<input type="text"/>

(PLEASE USE BLOK CAPITALS)

First Name \*

Last Name \*

<input type="text"/>	<input type="text"/>
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Full Address including Post Code \*

Email \*

Telephone Number/s \*

(Include Emergency Contact number also)

<input type="text"/>	<input type="text"/>
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Date of Birth \*

Gender \*

Known Allergies\*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Medications: *	Dosage: *	Frequency: *
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Is there anything else we need to know? \*

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### West of Scotland Disability Sports Application Form

**Data Protection GDS, Subgroup of West of Scotland Disability Sports Club** will hold all the above information for the following reasons:

To send you information on meetings, social & fundraising events, competitions and ensure you are classified in the correct events. Share your identifiable health information with partner organisations such as Disability Sport Glasgow and if required, the emergency services. To make reasonable adjustments to support you in your chosen sport and ensure that your eligibility statement and classification are correct.

#### Cost & Making Payments

The Athlete entry fee is required to be **One Sport - £50 or Two/ Three Sports - £60**

A **non-refundable deposit of £30** is required along with the regional entry form by Friday **24<sup>th</sup> January 2025**.

**The final payment will be required by Friday 30th May 2025.**

It is appreciated if the payment deadlines are met as this has a knock-on effect in all areas of planning.

**Payment through electronic banking is preferred:**

**Bank Account:** Disability Sports Glasgow (SCIO)

**Sort code:** 80-22-60

**Account No:** 22858463

**Reference** NSG – add in athletes name i.e. (NSG – Joe Bloggs)

**Please Sign & Date in the box: \***

Should you wish to change your communication preferences or withdraw consent to the above, please in the first instance contact Nancy Peters at [nancypeters@btinternet.com](mailto:nancypeters@btinternet.com)