

Please print in block capitals

Date: 

Sports Federation/Country:	Date of Birth:
Where applicable, please state disability	

First Name:	Last Name:	Sex:
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Address (for February 2009 – July 2009):

Tel (incl. area code):	Fax (incl. area code):
Mobile (incl. Area code):	E-mail:

Work/College/School Address:	
Work Phone (including area code):	Working Hours

**Permanent Training Venue 1**

Name & Address of Venue:

State TIMES of Training Session below:

Day	Mon	Tue	Wed	Thur	Fri	Sat	Sun
AM							
PM							

**Permanent Training Venue 2** *(Please attach additional training venues on a separate page)*

Name & Address of Venue:

State TIMES of Training Session below:

Day	Mon	Tue	Wed	Thur	Fri	Sat	Sun
AM							
PM							

\*\*\*Please return *both* pages of this form to: \*\*\*

WAKO Anti Doping Unit, Nicholstown Lodge, Nicholstown, Kilcock, Co Kildare Ireland.

E-mail: [roy.baker@airtricity.com](mailto:roy.baker@airtricity.com) Phone: 00353876775614

\*\*\*Please return **both** pages of this form

**February 2009 - July 2009**

**If you do not intend to travel away from your permanent training venue please strike a line through this page**

First Name:	Last Name:	Date:
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(Please fill in each numbered box with an A, B, C, D, to indicate the date you will be away from your address on page 1 of this form)

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Nov 2008																																
Dec 2008																																
Jan 2009																																
Feb 2009																																
March 2009																																
April 2009																																

(Please include holidays above and give address(es) below at which you will be staying, indicating which address refers to your holiday break)

Temporary Training Venue A	Temporary Training Venue B	Temporary Training Venue C	Temporary Training Venue D

Temporary Address A	Temporary Address B	Temporary Address C	Temporary Address D

**Competition & Training Camp Schedule**

Competition/Training Camp	Town	Country	Date (from)	Date (to)	* Temp Training Address? * (Fill in A, B, C below)
1					
2					
3					
4					

*(Please attach details for other competitions/training camps on a separate page)*

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