

## **Retirement Notification Form**

World Taekwondo

sport@wtf.org / antidoping@wtf.org

# WT RETIREMENT NOTIFICATION FORM

IMPORTANT NOTE FOR ATHLETES:

Please complete the "Athlete Information" section of this form in capital letters and forward it to the WT. Your retirement date will be the date that WT receives this form with the Athlete Information section <u>fully</u> completed. WT will provide you with a written confirmation that your retirement has been received and accepted. This written confirmation should be shown to Doping Control Officers if you are asked to provide a Sample following your retirement date. If you do not receive a written confirmation of your retirement please contact WT. (If you are retiring from more than one National Federations, you must complete a separate form)

WT Anti-Doping Coordinator 82-2-3420-1432 e-mail: antidoping@wtf.org / marcoienna@wtf.org

#### ATHLETE INFORMATION (For completion by Athlete)

Nationality :	Date of birth	·	
First Name:	Last Name:		
Postal Address:			
		Post Code:	
Residential Address (if different	from postal address):		
City :	State:	Post Code:	
Email Address:	Мо	bile Phone Number:	
CONFORMATION BY THE M	IEMBERNATIONAL ASSO	CIATION (National Association/Federation	n only)
Name of Association / Federati	on		

Name of MNA President \_\_\_\_

(Signature of MNA president)

I hereby certify that I am retiring from competition.

I hereby advise that I have discussed the implications of my retirement with relevant personnel from my National Federation

(NF). I am also aware of and understand the rules regarding Retirement and Return to Competition (Reinstatement) in the antidoping policies that are relevant to me.

I acknowledge that my retirement date will be the date that WT receives form fully completed my fully completed form and that WT provides me with a written confirmation of my retirement, including my retirement date.

Signature

Place and Date (dd/mm/yy)

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### CONFIRMATION OF ATHLETE STATUS (For completion by WT)

WT OFFICE USE ONLY:				
Date fully completed WT Retirement Notification Fo	orm received*:			
Receiving officer:				
Written confirmation of retirement sent to:				
• Athlete: Yes / No	Date:			
• NF: Yes / No	Date:			
International Federation: Yes / No / N/A	Date:			
*This will be the Athlete's retirement date.				