

**CLASSIFICATION SCHEDULE**

**Event:**

**Date**:

**Location**:

**Classifiers**:

**Athlete Instructions:**

* All athletes must have submitted a Medical Diagnostics Form to their sport prior to Classification.
* All athletes must have read the Classification fact Sheet for Physical or Visual Impairment <https://paralympics.org.nz/athletes/classification/classification-forms/>
* Present to the Classification room **10 minutes before** the allocated time on the Classification Schedule to allow time to complete the Athlete Consent Form and other details.
* May be accompanied by one support person. A requirement if the athlete is under 18 years old.
* Athletes with a physical impairment must bring all adapted sports equipment to classification (e.g.aids/strapping/prosthesis).This does not include cycles, racing wheelchairs or other large pieces of equipment.
* Athletes with a physical impairment must be appropriately dressed in sports clothing, e.g. togs (if a Para swimmer), shorts and relevant sports tops.
* Athletes with a Physical and Visual Impairment must bring the most recent medical information. This must be no more than 12 months old.

.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Time** | **Surname** | **First Name** | **Gender** | **Entry Class** | **Status (New/Review)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Lunch Break |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

If you require any further information please contact:

Marguerite Christophers

Classification Manager

Ph. 021 746727

[classification@paralympics.org.nz](mailto:classification@paralympics.org.nz)