



WORLD ASSOCIATION OF KICKBOXING ORGANIZATIONS

MEDICAL CERTIFICATE

for referee / judge

For:

- ☐ - annual registration
☐ - championship - competition

| | | |
|--------------|--------------------------|--|
| Country Code | WAKO National Federation | <input type="checkbox"/> Passport No. / <input type="checkbox"/> Identity card No. |
| <div></div> | | |

| Sports ID Number | Family name | Given name | Middle name | Nationality / Citizenship |
|------------------|-------------|------------|-------------|---------------------------|
| | | | | |

| Gender M / F | Kickboxing discipline Ring / Tatami / Forms | Duty (cross one or both possibilities) |
|-----------------|--|---|
| | | Referee / Judge |

I hereby confirm that the referee / judge indicated above has passed a pre-participation screening following his/her national laws and WAKO Medical Rules (SEE PAGE TWO), and he/she is

Medically FIT

to take part to the current WAKO event and to referee / judge in kickboxing.

Under current WAKO Medical Rules, I confirm, moreover, that the referee / judge is not medically suspended from participating to this WAKO event and he/she has no health problems that would prevent him/her from performing his/her duties properly.

| | |
|---|----------------------------------|
| This certificate is valid until: | <div></div> Date (dd/mm/yyyy) |
|---|----------------------------------|

DECLARATION: "I, the undersigned, declare on my honor that I am eligible and fulfil the Conditions stipulated by the Rules of WAKO. I also declare that, pursuant to Regulation (EU) 679/2016 (GDPR), I am aware that the data collected through this document will be processed for the purposes described in WAKO Privacy Notice and that I have taken vision of the latter pursuant to art.13 GDPR."

Date (dd/mm/yy)

Signature and stamp of authorized Medical Doctor

Date (dd/mm/yy)

Signature and stamp of Chairman of Medical Committee
of the National Federation

WAKO HQ: Via Alessandro Manzoni, 18 - 20900 Monza (MB) Italy
E-mail: barbaraf@wakoweb.com - Tel. +39 3450135521 - Fax +39 039 2328901 - Web: <http://www.wakoweb.com>



WORLD ASSOCIATION OF KICKBOXING ORGANIZATIONS

MIMINUM EXAMS AND INSTRUMENTAL ASCERTAINMENTS FOR THE RELEASE OF MEDICAL CERTIFICATE FOR WAKO REFEREE / JUDGE

This certificate must be issued by national federation's GP or sports doctor and should be approved by NF's Medical Committee.

The minimum checks that are proper for releasing the medical certificate is:

To perform the duties of referee / judge:

Mandatory:

- **general physical examination with rest ECG**,
- **visual acuity test** (through Snellen charts) with a threshold of 6/10 in each eye and 8/10 with both eyes (without correction). The use of contact lenses to correct is allowed while refereeing/judging (spectacles are not allowed).
- **normal visual field** to be tested through a confrontation visual field test
- **normal hearing** to be tested through a whispered voice test.

These are the minimum requirements for the release of a Medical Certificate for WAKO duty of referee / judge. It can be implemented case by case, following National laws and National Federations' Medical Rules.

The maximum length validity for a **Medical Certificate**, independently from the duty is **one year**.

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