



**2019 World Deaf Indoor Athletics Championships  
Athlete Substitution Form**



Please complete the form and submit to the **Technical Information Centre (TIC)**  
by **12:00** on the **day before** the event starts.

<b>Participant Details</b>	
Country Name	
Date & Time of Request	
Requested By	
Signature	

<b>Substitution Details</b>			
Event Name			
Existing Athlete Name		Bib #	
Substitute Athlete Name		Bib #	

A substitution can only be made with an athlete who is registered as a **reserve** for the event.

<b>Technical Information Centre (TIC) Use Only</b>	
Request Received By	
Date & Time Received	

<b>ICSD Technical Director Use Only</b>	
Request Confirmed By	
Date & Time Confirmed	