



# Athlete Whereabouts Form

1 July – 30 September 2007

**Due at ASADA – 14th June 2007**

\*Please tick relevant box: Quarterly Submission  Update

## Section 1 – Athlete Details

(Fields marked with an \* are mandatory)

Nationality *	<input type="text"/>	Date of Birth *	<input type="text"/> / <input type="text"/> / <input type="text"/>	Gender *	<input type="text"/>
First Name *	<input type="text"/>	Last name *	<input type="text"/>		
National Sports Organisation *	<input type="text"/>	Sport / Discipline *	<input type="text"/>		
Disabilities	<i>(if applicable)</i>				
Primary Residential Address *	Street *	<input type="text"/>			
	Suburb / Town *	State / Province *	Post Code*		
	Country *	<input type="text"/>			
Primary Mailing Address *	Street *	<input type="text"/>			
	Suburb / Town *	State / Province *	Post Code*		
	Country *	<input type="text"/>			
Primary Phone *	<input type="text"/>	Phone (w)	<input type="text"/>		
Phone (Mob)	<input type="text"/>	Email	<input type="text"/>		
Alternate Contact Name*	<input type="text"/>	Alternate Contact Ph*	<input type="text"/>		
Self Coached *	Yes <input type="checkbox"/> No <input type="checkbox"/> (You must provide coach's full name below)				
Coach Full Name *	<input type="text"/>	Coach Contact Ph	<input type="text"/>		

## Section 2 – Regular Locations (R)

(Fields marked with an \* are mandatory)

Provide details of regular locations you will be entering in this quarter's calendar.

R1	Activity *	Training <input type="checkbox"/>	Work <input type="checkbox"/>	Home <input type="checkbox"/>	Gym <input type="checkbox"/>	Other <input type="checkbox"/>
	Description*	<input type="text"/>				
	Street *	<input type="text"/>				
	Suburb / Town *	State / Province *	Post Code*			
	Country *	<input type="text"/>				
R2	Activity *	Training <input type="checkbox"/>	Work <input type="checkbox"/>	Home <input type="checkbox"/>	Gym <input type="checkbox"/>	Other <input type="checkbox"/>
	Description*	<input type="text"/>				
	Street *	<input type="text"/>				
	Suburb / Town *	State / Province *	Post Code*			
	Country *	<input type="text"/>				
R3	Activity *	Training <input type="checkbox"/>	Work <input type="checkbox"/>	Home <input type="checkbox"/>	Gym <input type="checkbox"/>	Other <input type="checkbox"/>
	Description*	<input type="text"/>				
	Street *	<input type="text"/>				
	Suburb / Town *	State / Province *	Post Code*			
	Country *	<input type="text"/>				
R4	Activity *	Training <input type="checkbox"/>	Work <input type="checkbox"/>	Home <input type="checkbox"/>	Gym <input type="checkbox"/>	Other <input type="checkbox"/>
	Description*	<input type="text"/>				
	Street *	<input type="text"/>				
	Suburb / Town *	State / Province *	Post Code*			
	Country *	<input type="text"/>				

**EXAMPLE ONLY**  
**\* NOT TO BE USED**

### Section 3 – Training Camps (T)

(Fields marked with an \* are mandatory)

Any domestic or international training camps you will be entering in this quarter's calendar.

<b>T1</b>	Camp Title / Description *	
	Camp Venue *	
	Accommodation Address	
<b>T2</b>	Camp Title / Description *	
	Camp Venue *	
	Accommodation Address	
<b>T3</b>	Camp Title / Description *	
	Camp Venue *	
	Accommodation Address	
<b>T4</b>	Camp Title / Description *	
	Camp Venue *	
	Accommodation Address	

### Section 4 – Competitions (C)

(Fields marked with an \* are mandatory)

Any domestic or international competitions you will be entering in this quarter's calendar.

<b>C1</b>	Competition Name *	
	Venue Address *	
	City / Town *	
	Country *	
<b>C2</b>	Competition Name *	
	Venue Address *	
	City / Town *	
	Country *	
<b>C3</b>	Competition Name *	
	Venue Address *	
	City / Town *	
	Country *	
<b>C4</b>	Competition Name *	
	Venue Address *	
	City / Town *	
	Country *	

**EXAMPLE ONLY**  
**\* NOT TO BE USED**

**Section 5 – Alternative Locations (A)** (Fields marked with an \* are mandatory)

Locations other than regular, training camps and competitions that you will be entering in this quarter's calendar.

**A1**

Description *	
Country *	
Street / City / Town / Province *	
Suburb *	State * Post Code *

**A2**

Description *	
Country *	
Street / City / Town / Province *	
Suburb *	State * Post Code *

**A3**

Description *	
Country *	
Street / City / Town / Province *	
Suburb *	State * Post Code *

**A4**

Description *	
Country *	
Street / City / Town / Province *	
Suburb *	State * Post Code *

**Section 6 – Partial Alternative Locations A – (P)** (Fields marked with an \* are mandatory)

If you are unable to provide complete Alternative location details as yet you can enter a Partial Alternative Location. If you choose to do this you are required to provide at least a description of the location and the relevant country when submitting this form.

**You must also agree (by ticking the relevant box) to then update ASADA with complete location details at least 48 hours prior to the date you have entered this Partial Alternative Location in your calendar.**

If you have any difficulties meeting the requirements of this section, you must contact the ASADA Hotline on 1800 020 506 (International +61 2 62060288) prior to the relevant date.

**A – (P)1**

Description *	
Country *	

Tick \*  I understand I will need to complete details of this location at least 48 hours before the relevant date.

**A – (P)2**

Description *	
Country *	

Tick \*  I understand I will need to complete details of this location at least 48 hours before the relevant date.

**A – (P)3**

Description *	
Country *	

Tick \*  I understand I will need to complete details of this location at least 48 hours before the relevant date.

**EXAMPLE ONLY**  
**\* NOT TO BE USED**

## Section 7 – Quarterly Calendar

Please read carefully before filling out your calendar.

- 1 Fill in your calendar with the letters that correspond to the Regular, Training Camp, Competition and Alternative Locations you have created in Sections 2, 3, 4, 5 and 6 of this whereabouts form.
- 2 **For each day of the calendar, you are required to:**
  - (a) **Nominate one location per day where you will be available for sample collection; and;**
  - (b) **The one hour time period you will be at that nominated location \***
- 3 You only have to select the **START TIME** of the one hour period you will be at your nominated location. For example, selecting 10am indicates that the hour you are agreeing to be at your chosen location is 10am to 11am.
- 4 You can only select start times that are on the hour or that contain 15 minute increments. For example you can select 2pm, 2:15pm, 2:30pm or 2:45pm but you can NOT select 2:07pm. Any calendar entries with a start time outside of this policy will have the start time for that calendar entry amended to the closest allowable start time.
- 5 For **Regular Locations**, put in the relevant letter and number e.g. R1.  
For **Training Camps**, put in the relevant letter and number e.g. T1.  
For **Competitions**, put in the relevant letter and number e.g. C1.  
For **Alternative Locations**, put in the relevant letter and number eg. A1. \*  
For **Partial Alternative Locations**, put in the relevant letter and number eg. A1-P.  
For **Transit** put the letter X
- 6 **You cannot select Transit (X) for more than 3 days in a row.**
- 7 A start time is NOT required for Transit (X) or Partial Alternative Locations A – (P). All other locations require a valid start time.
- 8 If this form is an update of your Athlete Whereabouts Information remember updates for a date that has already passed will not be accepted.
- 9 Updates for a particular date must be received by ASADA by midnight (12am) Australian Eastern Standard Time, the date before.

### KEY

Date: 

31
L:
ST:

Location Code: 

L:
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Start Time: 

ST:
-----

### EXAMPLE

31
R1
10am

October 2006						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
8	9	10	11	12	13	14
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
15	16	17	18	19	20	21
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
22	23	24	25	26	27	28
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
29	30	31				
L:	L:	L:				
ST:	ST:	ST:				

EXAMPLE ONLY  
NOT TO BE USED

Section 7 – Quarterly Calendar (Continued)

November 2006						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
			L:	L:	L:	L:
			ST:	ST:	ST:	ST:
5	6	7	8	9	10	11
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
12	13	14	15	16	17	18
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
19	20	21	22	23	24	25
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
26	27	28	29	30		
L:	L:	L:	L:	L:		
ST:	ST:	ST:	ST:	ST:		

December 2006						
SUN	MON	TUE	WED	THU	FRI	SAT
31					1	2
L:					L:	L:
ST:					ST:	ST:
3	4	5	6	7	8	9
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
10	11	12	13	14	15	16
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
17	18	19	20	21	22	23
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:
24	25	26	27	28	29	30
L:	L:	L:	L:	L:	L:	L:
ST:	ST:	ST:	ST:	ST:	ST:	ST:

EXAMPLE ONLY  
\* NOT TO BE USED

For **Regular Locations**, put in the relevant letter and number e.g. **R1**.  
 For **Training Camps**, put in the relevant letter and number e.g. **T1**.  
 For **Competitions**, put in the relevant letter and number e.g. **C1**.  
 For **Alternative Locations**, put in the relevant letter and number eg. **A1**.  
 For **Partial Alternative Locations**, put in the relevant letter and number eg. **A – (P)1**  
 For **Transit** put the letter **X**

**KEY**

Date:	31	<b>EXAMPLE</b>	31
Location Code:	L:		R1
Start Time:	ST:		10am

## Section 8 – Privacy, Security and Consequences

Please read carefully (no action required)

**PRIVACY STATEMENT:** ASADA is authorised under the Australian Sports Anti-Doping Authority Act 2006 and ASADA Regulations, which contain the National Anti-Doping scheme, to collect, maintain, utilise and disseminate the information provided on this form for lawful purposes. The information collected on this form will be used by the Australian Sports Anti-Doping Authority, pursuant to its powers and functions under the Australian Sports Anti-Doping Authority Act 2006 and ASADA Regulations which contain the National Anti-Doping scheme, for the implementation, coordination, administration, monitoring and enforcement by ASADA of effective doping control measures. The information collected on this form may be released to a number of parties in circumstances as described for in the National Anti-Doping scheme including but not limited to: The Australian Sports Commission, The International Olympic Committee, The World Anti-Doping Agency, other National and International Anti-Doping Organisations, for the purposes of the implementation, coordination, administration, monitoring and enforcement of anti-doping programs in sport. **SECURITY STATEMENT:** ASADA shall take all reasonable care to ensure that the

information provided is kept secure against loss, unauthorised access, use, modification or disclosure other than in accordance with the terms upon which the information is provided. However, ASADA accepts no responsibility for any misuse of the information provided. Unauthorised use is prohibited and may result in the person/s involved being prosecuted. **CONSEQUENCES:** Athlete's who fail to provide accurate and timely information may be entered onto ASADA's Register of Findings and may be subject to sanction from their sport as described by the National Anti-Doping scheme and applicable anti-doping policy.

## Section 9 – Athlete Declaration

Athletes must sign and date the following declaration for the form to be considered complete unless the form is being completed by an Authorised Representative (see section 10).

I declare that the information I have provided on this form is accurate and complete and I recognise that failure to provide accurate and complete information on my whereabouts and failure to update and keep current my Athlete Whereabouts Information may result in declarations or anti-doping rule violations against me. I consent to this information being used by ASADA and disclosed pursuant to the Australian Sports Anti-Doping Authority Act 2006 and ASADA Regulations which contain the National Anti-Doping Scheme.

Athlete Name

Athlete Signature

Date

/ /

### Section 10 – Authorised Representative Declaration (only if applicable)

Authorised Representatives must sign and date the following declaration if they are completing and submitting the form on behalf of an athlete.

I declare that I have been nominated by the athlete to provide the information on this form and that serious consequences may result to the athlete if the Athlete Whereabouts Information is not complete and accurate and/or is not updated and kept current. The athlete consents to this information being used by ASADA and disclosed pursuant to the Australian Sports Anti-Doping Authority Act 2006 and ASADA Regulations which contain the National Anti-Doping Scheme.

Authorised Representative Name

Athlete Representative Signature

Date

/ /

**EXAMPLE ONLY**  
**\* NOT TO BE USED**