



PROCEDURE to DELIVER INTERNATIONAL LICENCES to
SKI RACING DRIVERS and OBSERVERS

For safety reasons the International Licences issued by the EAME Racing council and delivered by the National Federations to their teams, shall be given to the applicants, according with the following instructions :

- It is the responsibility of the National Federations to deliver the International Licences to experienced boat drivers and observers
- When there is an obligation to be in possession of a boat driving licence issued by the (marine) authorities of their own country, the applicants shall be in possession of such a license
 - Before obtaining an International provisional Licence, the candidates must participate minimum one year in local and National ski races.
 - The applicants shall be in possession of the International rule book and know the content of it.
 - An experienced International driver and an experienced International observer of the National Federation should explain to the applicants the general procedure of international races on lakes, rivers and at sea, for instance:
 - * overtaking other competitors on different circuits
 - * how to manage turns
 - * which is the most usual and safest way to protect a fallen skier, etc.
 - The international licence shall be given as a provisional one, during the first year
 - To obtain the final qualification to participate in the Europe Cup, European Championships or World title events, the holders of the provisional licence must participate during one year in at least three national races (if possible at sea, river or canal and lake), to gain experience.
 - Driver and Observer shall assist to a first aid training course for emergency situations.
 - Medical Certificate: It is obligatory to present the medical certificate duly completed every two years, as a minimum.

MEDICAL DOCTOR CERTIFICATE
CERTIFICAT DU MEDECIN

Name Christian Name
Nom Prénom
FEDERATION

I certify that I have examined the above candidate
And in my opinion find

HIM/HER / FIT/UNFIT
To hold our International Licence as driver or
Observer for Water Ski Racing.

Je certifie avoir examiné le candidat ci dessus et le
déclare
APTE / INAPTE
à être titulaire de la Licence Internationale de Pilote
ou Observateur de Courses de SKI NAUTIQUE.

Signature Date
Name / Nom Qualification

Address / Adresse
.....
.....

Telephone Number / Tel.
Prescription Number

N° de prescription
To be returned to the National Federation
A retourner à la Fédération Nationale

To be completed by the applicant in the examiner's presence
A compléter par le postulant en présence de l'examinateur

Have you suffered from : / Avez-vous souffert de :

- 1 - Epilepsy or other fits / Epilepsie ou autre crise
- 2 - Fits, fainting attacks, severe vertigo, loss of consciousness
Attaques syncopes, vertiges sévères, perte de conscience
- 3 - Diabetes / Diabètes
- 4 - Heart trouble or abnormalities
Troubles cardiaques ou anomalies
- 5 - Severe chest trouble / Sévères troubles respiratoires
- 6 - Deformities or malfunction of limbs or part of
Déformation ou mauvais fonctionnement partiel ou total des poumons

YES / NO - OUI / NO
YES / NO
OUI / NON
YES / NO - OUI / NC
YES / NO
OUI / NON
YES / NO - OUI / NC
YES / NO
OUI / NON

If the answer to any question is YES, please give details below.

Si la réponse à une question est OUI, veuillez donner des détails ci-dessous:

.....
I declare that answers to the questions above are true (if information is withheld suppressed or
deliberately misleading or false, you may be liable to suspension of the licence)
Je déclare que les réponses aux questions ci-dessus sont sincères. (En cas de suppression,
Omission ou information délibérément trompeuse vous risquez la suspension de licence)

SIG. DATE

Medical Examination / Examen médical

- 1 - Chest / Pulmonaire B.P. / Tension Puls / Pouls
- 2 - Heart / Cardiaque Right eye / Oeil droit Left eye / Oeil gauche
- 3 - Eyesight / Oculaire from near / de près R.N. from near / de près L.N.
- from far / de loin V. from far / de loin V.

Please state whether the glasses are used for far vision, minimal requirements 6/24 in one eye
6/9 in the other.

Prière de préciser si les verres sont utilisés pour la vision de loin, minimum nécessaire :
3/10^e sur un œil / 10^e sur l'autre.

- 4 - Fields of vision / Champ visuel
- 5 - Colour: Is the candidate able to distinguish RED, YELLOW, BLACK, BLUE, GREEN
Couleurs: le candidat est-il capable de distinguer le ROUGE, JAUNE, NOIR, VERT et BLEU
- 6 - Urine : Alb / Albumine Sugar / Sucre

NOTE: The applicant is responsible for any medical fee payable.

NOTA: Le compétiteur est responsable des honoraires médicaux

This questionnaire is confidential.

Ce questionnaire est confidentiel.