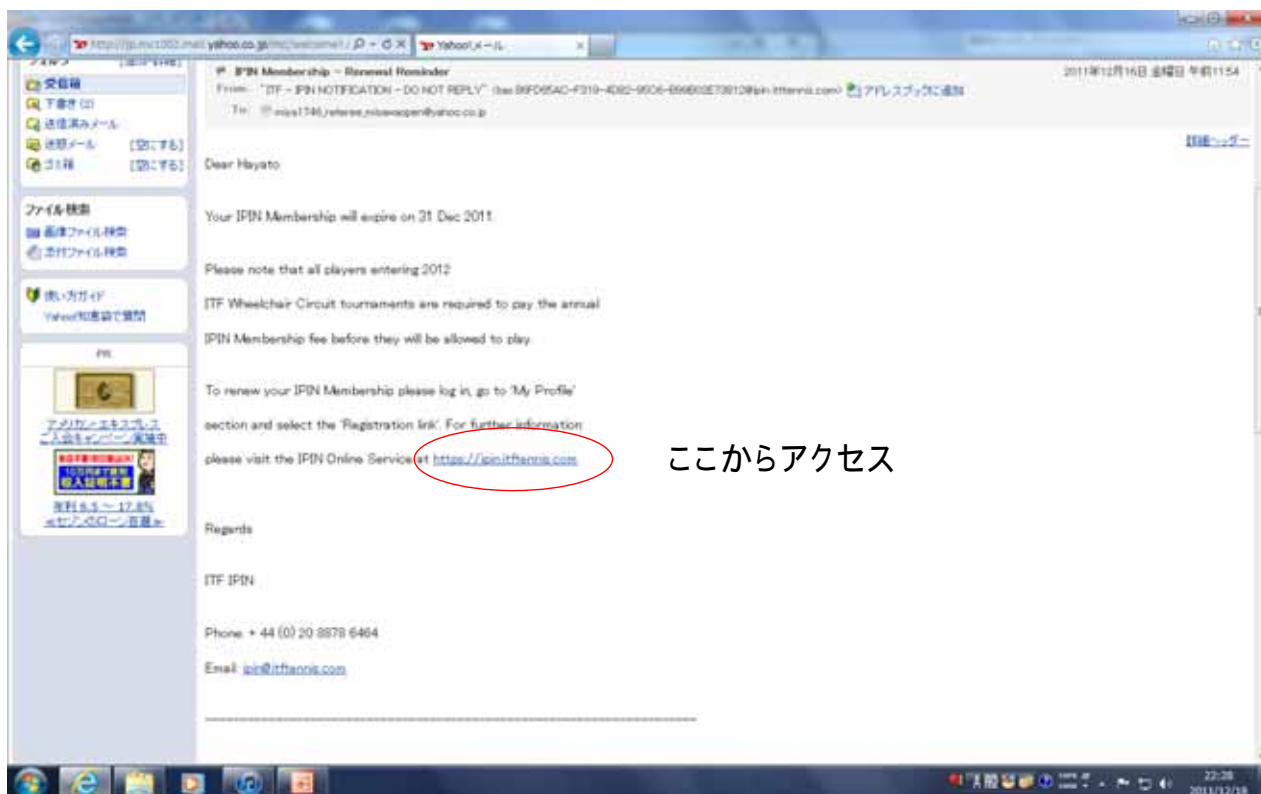


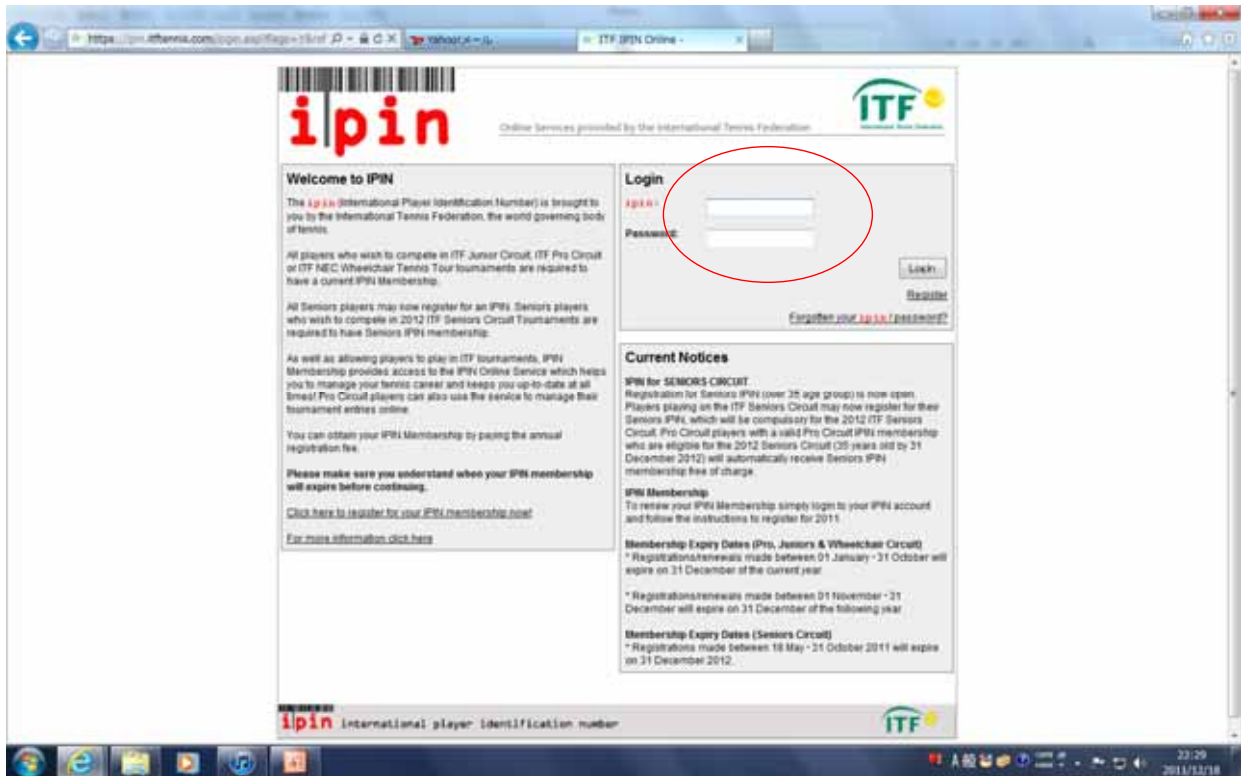
こんなメールが届いていると思います



ここからアクセス



登録時のIPINとパスワードを入力してログインします



https://ipin.itftennis.com/ipin/playerwelfare... ITF IPIN Online - Player ...

**ipin** **NEC Wheelchair Tennis Tour** **ITF**  
Online Services provided by the International Tennis Federation  
Sun 10 Dec 2011 13:31:44 (GMT) Welcome HAYATO SUDA  
Luton

**Annual renewal of Player Welfare Statement**

Please read and complete the Player Welfare Statement below and click Confirm to continue your login to IPIN.

**Player Welfare Statement**

**1. Agreements of the Player**

I declare that I am aware of and will abide by the Rules of Tennis, as approved by the International Tennis Federation, the ITF Pro Circuit and/or ITF Junior Circuit and/or ITF Seniors and/or ITF Wheelchair Tennis Regulations and Code of Conduct, as amended from time to time by the ITF Men's and Women's and/or Junior and/or Seniors and/or Wheelchair Tennis Committees (the "Rules"). The Rules include but are not limited to the Age Eligibility Rule, the ITF Tennis Anti-Doping program, the Uniform Tennis Anti-Corruption Program and the ITF Player Welfare Policy. Finally, I understand that this agreement will remain in full force and effect until I further advise the ITF in writing that I am permanently retiring from participation in tennis with immediate effect.

**Waivers**

I understand that there are inherent risks involved in my participation in ITF Tournaments, including, but not limited to, those associated with weather conditions, playing conditions, equipment, other participants and spectators. I fully assume the risks associated with my participation in the Tournaments. To the full extent permissible by law I waive any and all claims that I, my heirs or legal representatives may have against the ITF, the Tournaments, or any ITF sponsor or against any director, officer, employee, authorized agent or independent contractor of any of them for personal injury and/or any loss or damage that is incurred during my participation in a Tournament or arising in conjunction with any decision, ruling or action of any of them or their directors, officers, employees, authorized agent or independent contractor with respect to all matters within their respective jurisdictions.

I hereby accept that in the event of a tournament being cancelled for reasons of force majeure or a perceived risk in the opinion of the ITF or tournament organiser, the ITF or tournament organiser accepts no liability for unrecoverable costs including, but not limited to, airfare and accommodation costs.

**Insurance**

I understand and agree that it is my responsibility to have in place appropriate level, medical and personal accident insurance for myself when participating in any ITF Tournament.

**2. Anti-Doping Consent**

I understand and agree that the ITF may conduct anti-doping testing at ITF-sanctioned events under the ITF Tennis Anti-Doping Programme (the "Programme"), the full text of which can be found at [www.itftennis.com/antidoping](http://www.itftennis.com/antidoping). I consent and agree to comply with all of the provisions of the Programme. I acknowledge that I have had an opportunity to review the Programme and that I understand its provisions.

https://ipin.itftennis.com/ipin/playerwelfare... ITF IPIN Online - Player ...

**3. Anti-Corruption Consent**

I understand that I am subject to the provisions of the Uniform Tennis Anti-Corruption Programme (the "Anti-Corruption Programme"), found on [www.itftennis.com](http://www.itftennis.com) and I agree not to violate any of the provisions therein. I acknowledge and understand that the Anti-Corruption Programme covers "Warnings", "Compliance" and "Reporting Obligations" and such terms are defined in the Anti-Corruption Programme. I acknowledge and understand that if I am found to have violated any of the provisions of the Anti-Corruption Programme, I shall be subject to disciplinary process and/or the penalties set forth in the Anti-Corruption Programme.

**4. Eligibility for Wheelchair Tennis Players**

If I am a Wheelchair Tennis Player, I understand and agree that I have a medically diagnosed permanent physical disability as defined in the Rules of Wheelchair Tennis, found at [www.itftennis.com/wheelchairtennis/eligibilityrules.asp](http://www.itftennis.com/wheelchairtennis/eligibilityrules.asp) and that I am eligible to compete in ITF sanctioned wheelchair tennis tournaments. I understand that if requested by the ITF, I will supply appropriate medical documentation that substantiates the disability.

**5. Minor Medical Release - Players under 18 years of Age**

Please ensure that your parents and/or legal guardian have read this release in relation to medical emergencies involving you.

When participating at the Tournaments, if any emergency arises involving the physical or psychological well-being of the player and, at such time I (or any other legal guardian of the player) am not immediately available, I hereby give any Tournament appointed official, tournament physician and/or Sports Medicine Trainer full permission and authority to take such steps as are medically reasonable necessary to protect and assist the player. I agree to pay any hospital expenses, physician bills or any other expenses incurred as a result of any such medical emergency. In non-emergency situations, I hereby give any Tournament appointed tournament physician and/or Sports Medicine Trainer full permission and authority to administer standard on-site treatment as needed, including, but not limited to, standard athletic training treatments, medical care and physical therapy. I understand that such standard treatments may also be administered off-site during the Tournament week at the official Tournament hotel by the Tournament appointed tournament physician and/or Sports Medicine Trainer. Finally, I understand that this Minor Medical Release will remain in full force and effect until the eighteenth (18th) birthday of the player or until I further advise the ITF.

This Agreement shall be governed by and construed in accordance with the laws of England and Wales. Save where the Rules provide for another court or tribunal to have jurisdiction, the parties agree to refer any disputes arising out of or in connection with this Agreement to the Court of Arbitration for Sport for final and binding arbitration in accordance with the CAS Code of Sports Related Arbitration.

**Player Agreement**

I, HAYATO SUDA, have read, understood, consent and agree to the above agreements of the player (section 1), Anti-Doping Consent (section 2), and Anti-Corruption Consent (section 3), Eligibility for Wheelchair Tennis Players (section 4) (where applicable) and Minor Medical release (section 5) (where applicable). If I am under 18 years old, my parents and/or legal guardian have also read and accept this agreement on my behalf.

Tick this checkbox to indicate that you and (if you are under 18 years old) that your parents and/or legal guardian have read and accept the IPIN Player Welfare Statement.

**ipin** International player identification number **ITF**

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 See 18 Dec 2011 13:34:01 (GMT) Welcome HAYATO SUDA Logout

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Weeks From MONDAY 12 December 2011 To MONDAY 09 January 2012 Show Tournaments

**IMPORTANT**  
 Your [2011 Membership](#) will expire on 31st December 2011  
 Click here to see available renewal and upgrade options

Currently Showing 4 tournaments

Week Commencing MONDAY 12 DECEMBER 2011

Tournament Name	Nation	Region	Grade	Surface
Arsenal Company South Africa Johannesburg Open - Johannesburg	South Africa	Euro/African	ITF Futures Series	Hard (C)
Elc Tarpens Open - Rio Tarpens	Argentina	Americas	ITF Futures Series	Hard (C)

Week Commencing MONDAY 19 DECEMBER 2011  
 No tournaments found for this week

Week Commencing MONDAY 26 DECEMBER 2011  
 No tournaments found for this week

Week Commencing MONDAY 02 JANUARY 2012

Tournament Name	Nation	Region	Grade	Surface
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ipin **NEC Wheelchair Tennis Tour** ITF  
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 See 18 Dec 2011 13:34:43 (GMT) Welcome HAYATO SUDA Logout

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Personal Details Player Agent Details Tennis Background Details Security Details Registration Details Disability

Registration Details

Full Name HAYATO SUDA  
 ipin ID NUMBER 5125306126

Year	Membership Status	Wheelchair
2012	Not Registered	<a href="#">Click here to see available renewal and upgrade options</a>
2011	Registered	✓

ipin International player identification number ITF  
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https://ipin.itftennis.com/login/home/profile/m... Yahoo! X... ITF IPIN Online - Player...

**3. Anti-Corruption Consent**

I understand that I am subject to the provisions of the Uniform Tennis Anti-Corruption Programme (the "Anti-Corruption Programme"), found on [the ITF website](#) and I agree not to violate any of the provisions therein. I acknowledge and understand that the Anti-Corruption Programme covers "wagering", "Corruption" and "Reporting Obligations" and such terms are defined in the Anti-Corruption Programme. I acknowledge and understand that if I am found to have violated any of the provisions of the Anti-Corruption Programme, I shall be subject to disciplinary process and/or the penalties set forth in the Anti-Corruption Programme.

**4. Eligibility for Wheelchair Tennis Players**

If I am a Wheelchair Tennis Player, I understand and agree that I have a medically diagnosed permanent physical disability as defined in the Rules of Wheelchair Tennis, found at [www.itftennis.com/wheelchairrules/wheelchairrules.asp](#) and that I am eligible to compete in ITF sanctioned wheelchair tennis tournaments. I understand that if requested by the ITF, I will supply appropriate medical documentation that substantiates the disability.

**5. Minor Medical Release - Players under 18 years of Age**

Please ensure that your parents or legal guardian have read this release in relation to medical emergencies involving you.


When participating at the Tournaments, if any emergency arises involving the physical or psychological well-being of the player and, at such time I (or any other legal guardian of the player) am not immediately available, I hereby give any Tournament appointed official, tournament physician and/or Sports Medicine Trainer full permission and authority to take such steps as are medically reasonable necessary to protect and assist the player. I agree to pay any hospital expenses, physician bills or any other expenses incurred as a result of any such medical emergency. In non-emergency situations, I hereby give any Tournament appointed tournament physician and/or Sports Medicine Trainer full permission and authority to administer standard on-site treatment as needed, including, but not limited to, standard athlete training, treatments, medical care and physical therapy. I understand that such standard treatments may also be administered off-site during the Tournament week at the official Tournament hotel by the Tournament appointed tournament physician and/or Sports Medicine Trainer. Finally, I understand that this Minor Medical Release will remain in full force and effect until the eighteenth (18th) birthday of the player or until I further advise the ITF.

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**Player Agreement**

I, HAYATO SUZU, have read, understood, consent and agree to the above agreements of the player (section 1), Anti-Doping Consent (section 2), and Anti-Corruption Consent (section 3), Eligibility for Wheelchair Tennis Players (section 4) (where applicable) and Minor Medical Release (section 5) (where applicable). If I am under 18 years old, my parents and/or legal guardian have also read and accept this agreement on my behalf.

Tick this checkbox to indicate that you and if you are under 18 years old that your parents and/or legal guardian have read and accept the IPIN Player Welfare Statement.

**ipin** International player identification number 

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22:41 2011/12/18

https://ipin.itftennis.com/login/home/profile/m... Yahoo! X... ITF IPIN Online -

**ipin** **NEC Wheelchair Tennis Tour** 

Online Services provided by the International Tennis Federation

See 18 Dec 2011 13:41:55 (GMT) Welcome HAYATO SUZU Logout

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Personal Details Player Agent Details Tennis Biographic Details Security Details Registration Details Details

**Renewal**

**Renewal Payment**

To renew your **ipin** Membership you must pay an annual subscription fee.

Please check the details shown below and read the Terms & Conditions of usage before selecting a method of payment to complete your renewal.

**Registration Details**

Name	Email	IPIN Membership Dates	IPIN Membership	Fee
Hayato Suzu	msjs1746_referee_misawaopen@yahoo.co.jp	18 Dec 2011 to 31 Dec 2012	Wheelchair	USD20.00

**Terms and Conditions**

The following Terms and Conditions apply to your use of the IPIN Online Service at <https://ipin.itftennis.com> (the "Website") and to your registration and payment for an IPIN Membership from the International Tennis Federation (together the "IPIN Services").

These Terms and Conditions form a legally binding agreement between you and the International Tennis Federation in relation to your use of the Website and IPIN Services. It is important that you take time to read them carefully and we recommend that you print a copy off for your records.

If you breach these Terms & Conditions, we may take legal action against you, suspend or terminate your membership / registration and prevent your participation in any event which we may run in the future.

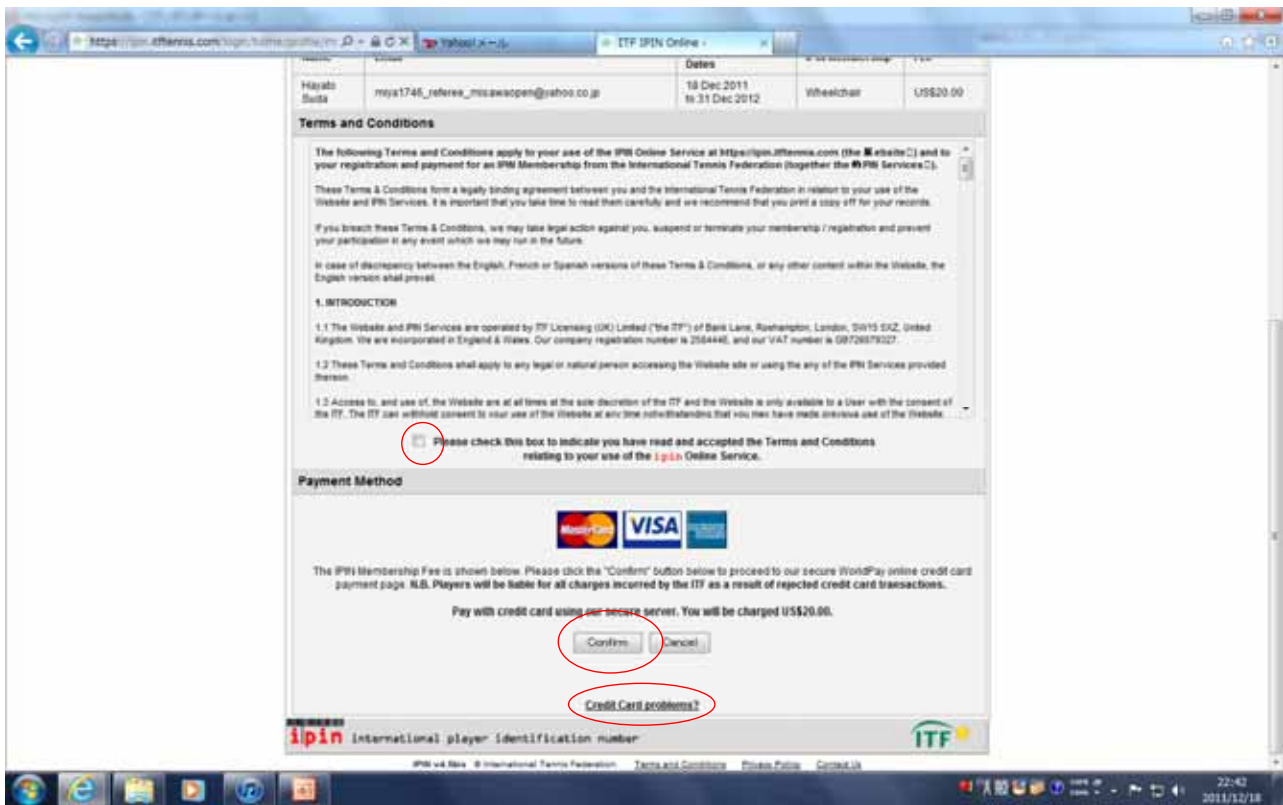
In case of discrepancy between the English, French or Spanish versions of these Terms & Conditions, or any other content within the Website, the English version shall prevail.

**1. INTRODUCTION**

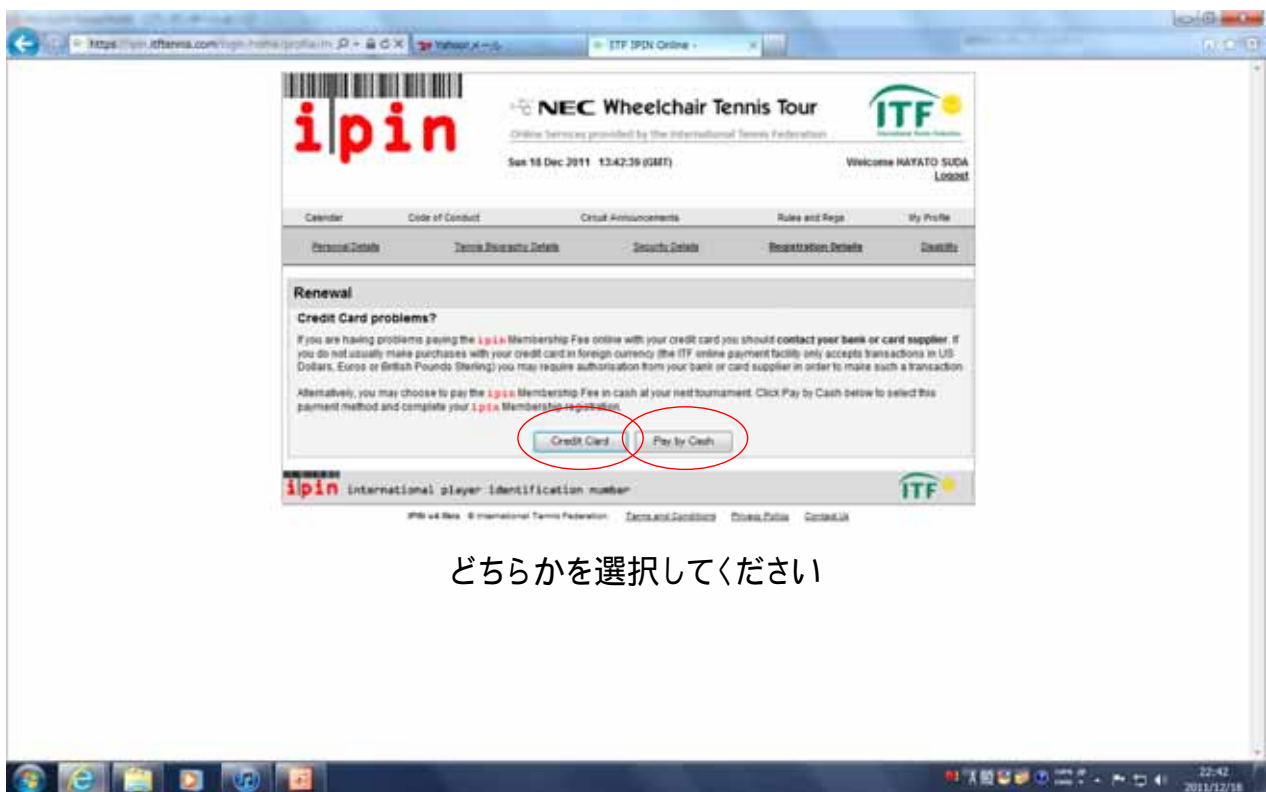
1.1 The Website and IPIN Services are operated by ITF Licensing (UK) Limited ("the ITF") of Saint Lane, Bostington, London, SE15 5XZ, United Kingdom. We are incorporated in England & Wales. Our company registration number is 258448, and our VAT number is GB72679327.

1.2 These Terms and Conditions shall apply to any legal or natural person accessing the Website site or using any of the IPIN Services provided.

22:41 2011/12/18



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どちらかを選択してください



現金払いの場合です



この画面で完了です

