

**100% Against Doping**

**Rider Consent**

Name of Rider: \_\_\_\_\_

Team of Rider: \_\_\_\_\_

Date of signature: \_\_\_\_\_

1. I agree that the results of my urine and blood tests can be sent to me at the following authorised email address :

*Authorised email address*

*Rider signature*

2. I agree that the following staff members of my team can receive results of my blood and urine tests\* directly from the UCI or via a log-on access to the ADAMS database:

*Names of team staff authorized to receive results*

*Rider signature*

3. I agree that the UCI can release results to the following additional people:

*Names of other people authorized to receive results*

*Rider signature*

**\* For the purposes of this Agreement, blood results will consist of 11 parameters measured by an accredited laboratory. Urine results will consist of a negative result or a result indicating the details of an adverse analytical finding.**