



## ASTHMA & OTHER MEDICATION NOTIFICATION FORM

### DOCTORS DETAILS

DOCTORS NAME:

WORK PHONE:

### ATHLETES DETAILS

ATHLETES NAME:

DOB:

ADDRESS:

HOME PHONE:

WORK PHONE:

MOBILE:

EMAIL:

### MEDICATION DETAILS

NAME OF MEDICATIONS:

REASONS FOR TREATMENT:

MODE OF ADMINISTRATION:

DOCTORS SIGNATURE:

DATE:

### PLEASE NOTE:

Athletes competing at a National level are required to submit this form to Hockey Australia. Athletes competing at a State level are required to submit this form to Hockey Queensland.

Athletes are advised to keep a copy of this form for their personal records.

When competing at international events, check the requirements regarding asthma and other medication notifications. Some events will require athletes to produce notification at a drug test.

Many asthma medications contained banned and restricted substances. If in doubt, check it at – call the ASADA hotline on 1800 020 506.

Other ASADA resources available to check medications include the Drugs in Sport Handbook and Wallet Card. To order, call ASADA on 02 6202 0233.

**\*Privacy Statement:** Hockey Queensland collects information about you to provide services to you, and to facilitate your involvement in the game of hockey, conduct marketing activities and market research. If the information is not provided Hockey Queensland may not be able to provide the service requested. Hockey Queensland may disclose your non-sensitive information to uniform suppliers, sponsors and to those organisations required by law. Further details can be found in our privacy policy at [www.hockeyqld.com.au](http://www.hockeyqld.com.au). You can gain access to the information Hockey Queensland holds about you by contacting Hockey Queensland Privacy Officer on 07 3399 6577.