

# UIM XCAT SUPERLICENCE 2024 APPLICATION FORM

In order to participate in UIM XCAT Series, every pilot/driver of the boat must hold a UIM XCAT Superlicence.

All UIM licences are valid from the date of issue to 31st December of the same year.

In the event of any accident either within the sport or beyond its jurisdiction that prevents an individual from racing on medical grounds, a new post injury medical certificate must be submitted prior to re issue of the individuals licence.

The event insurance must be complied with.

## **ISSUE OF SUPERLICENCE**

The UIM XCAT Superlicence can be obtained following a request by the driver's National Authority to the UIM.

The application for a UIM XCAT Superlicence must be lodged with the UIM three (03) weeks prior to the first event in which the pilot wants to participate is held.

The Driver Qualification fee will be doubled for applications received within the three (03) weeks deadline.

NO Application will be taken in consideration within one hour from the official Drivers briefing of each XCAT event.

## SUPERLICENCE FEE

The UIM XCAT Driver Qualification fee has been fixed to **500 euros** by the UIM Council and must be paid to the UIM Secretariat. For late application, the Driver Qualification fee has been fixed to **1000 euros** and must be paid to the UIM Secretariat.

## **MEDICAL EXPERTISE FEE**

Medical expertise fee for drivers, regardless the drivers' age submitting the results for Dual Emission X-ray Absorptiometry method (DXA) as their BMI is over 30 kg/m2: **200 euros** 

A Medical expertise fee for drivers over 50 years in the season must be paid to the UIM Secretariat: **200 euros** 



All required documents must be completed and the following additional documentation, or proof of such, must be provided to the UIM Secretariat:

- □ Qualification to get an Ordinary XCAT Licence
- □ The sports career of the pilot, including the results obtained in the previous two seasons of offshore racing.
- Evidence of having raced during the previous 2 years in Extreme Cat (6 litre), or equivalent as pilot or throttleman in at least 6 races.
   (Other classes may be taken into consideration as agreed by the UIM).
- □ Or evidence of having throttling or steering at least six races during the last two years, in any Offshore or Circuit class with closed cockpit.
- □ A written examination based on rules of the road and various XCAT rules. (for new drivers)
- □ Must prove the ability to swim min 100 meters
- □ Current immersion certificate.
- A medical certificate providing all the data required by the UIM Official medical form
- □ The fees fixed by and paid to the UIM

New drivers may for the first three (3) races not be throttling the boat.

The UIM may issue the UIM XCAT Superlicence on the basis of the information supplied by the pilot's National Authority. The UIM may withdraw a UIM XCAT Superlicence on the recommendation of the relevant pilot's National Authority.

Any Driver who has passed their 50th birthday before the date of application for a UIM XCAT Driver Qualification will be obliged to submit a medical report from their own doctor, and also a report of an examination by a doctor nominated by the UIM.

The minimum age for a pilot to qualify to hold a UIM XCAT Driver Qualification and to compete in an XCAT race is 18 years unless otherwise agreed by the UIM.

The application and nomination by the pilot's National Authority will be deemed to be the National Authority's consent to represent their country for the duration of the UIM XCAT Driver Qualification.



#### **Provisional Licence**

The UIM may authorize a provisional Licence for the second Driver who may not have the above - mentioned sports career to participate in the competitions provided that:

- The First Driver is well experienced, has attended the last two XCAT Series and takes the responsibility of the Second Driver's behavior in the race, the first driver must also sign the UIM letter of agreement regarding responsibility and;
- The applicant raced in powerboating or in international motorsport racing classes
- The applicant should have an Offshore or Circuit F1 & F2 Licence issued by his relevant National Authority.
- The application should be authorized by his N.A.
- The applicant passed a written examination based on rules of the road and various XCAT rules.
- The applicant must prove the ability to swim minimum 100 meters

An anthropometric check of data reported in the Driver Qualification application may be carried on at any event during the relevant season by a UIM appointed Medical and/or Anti-Doping delegate. In case the Driver's data would not be within the mandatory parameters, the Driver Qualification will be immediately withdrawn.



## MEDICAL EVALUATION SHEET 2024 – UIM XCAT SUPERLICENCE

If the medical sheet from page 4 to 8 is filled in electronically, and if the doctor and ophthalmologist cannot sign and stamp electronically, please submit to your UIM National Authority a separate scanned certificate with stamp and signature of the relevant medical specialist.

| Location of examination   | l                     | Date of examination                     |  |  |
|---------------------------|-----------------------|---|--|--|
| Name                      |                       | Surname                                 |  |  |
| Place of Birth            |                       | Date of Birth                           |  |  |
| Date of first involvemen  | t in powerboating     |   |  |  |
| Other sports practiced _  |                       |   |  |  |
| PR                        | ESENT STATE OF HEAI   | LTH AND FORMER DISEASES                 |  |  |
| Disease (former or curre  | ent <u>)</u>          |   |  |  |
| With special mention of   |                       |   |  |  |
| Cardiopathy               | Coronary              | □ Diabetes Type 1 / 2 (circle the type) |  |  |
| Epilepsy                  | □ High Blood Pre      | essure                                  |  |  |
| Surgical interventions un | ndergone to date      |   |  |  |
| Dates of these intervent  | ions                  |   |  |  |
| Accidents (when, where    | , under which circums | tances)                                 |  |  |
| Alcohol consumption       |                       | Tobacco                                 |  |  |
| Allergies                 |                       |   |  |  |
| Medicines usually/frequ   | ently taken           |   |  |  |
|                           |                       |   |  |  |

*Please keep in mind the Anti-Doping rules and the WADA – UIM list of banned substances and Therapeutic Use Exemption rules.* 



# GENERAL OBJECTIVE EXAMINATION 2024 - XCAT SUPERLICENCE

| Height:  | m                              | Weight:                  | kg           |       |         |
|--|--------------------------------|--------------------------|--------------|-------|---------|
| Body Mass Index (Weigh                               | ıt (kg)/Height <sup>2</sup> (n | n): BMI):                |              |       |         |
| Age  |                                | Gender                   |              |       |         |
| Congenital or acquired n                             | nalformations                  |                          |              |       |         |
| Respiratory system                                   |                                |                          |              |       |         |
| Spirometry (mandatory)                               | Please attach p                | printed results and grap | phs          |       |         |
| FVC (measured/predicted)                             |                                |                          |              |       |         |
| $FEV_1$ (measured/predicted)                         |                                |                          |              |       |         |
| Cardiovascular system:<br>Is there any evidence of   | abnormality of                 | the heart or cardiovasc  | ular system? | □ Yes | □ No    |
| If "Yes", give details belo                          | )w.                            |                          |              |       |         |
|  |                                |                          |              |       |         |
| Blood Pressure at rest                               |                                |                          |              |       |         |
| Hearth Frequency at rest                             | t                              |                          |              |       |         |
| Electrocardiogram at res                             | ;t                             |                          |              |       |         |
| Stress ECG (mandatory,<br>final separate report in I |                                |                          |              | • •   | ohs and |
|  |                                |                          |              |       |         |
|  |                                |                          |              |       |         |
|  |                                |                          |              |       |         |
|  |                                |                          |              |       |         |

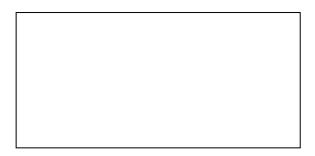


# **Ophtalmologic check-up (mandatory every other year)**

| Have you undergone this ophthalmologic check-up last year?  |   |                    |   |  |  |  |
|---|---|--------------------|---|--|--|--|
| If yes, please specif                                       | y when://   | /                  |   |  |  |  |
| If not, ask your oph  | thalmologist to insert  | following details: |   |  |  |  |
| Eyesight  | (uncorrected)   | R                  | L |  |  |  |
|   | (with correction)   | R                  | L |  |  |  |
| Eyesight with both  | Eyesight with both eyes open (wearing corrective lenses if necessary) |                    |   |  |  |  |
| Field of Vision   |   |                    |   |  |  |  |
| Vision of Colours: is the applicant's colour vision normal? |   |                    |   |  |  |  |
| If "No", give details below.                                |   |                    |   |  |  |  |
|   |   |                    |   |  |  |  |

Signature and practice stamp of the ophthalmologist

If the ophthalmologist report cannot be signed and stamped electronically, please submit for the attention of your UIM National Authority a separate certificate with stamp and signature of the ophthalmologist.





| Hearing Testing   |
|---|
| Urine: Albumine Sugar   |
| Is the Urine analysis normal?         Yes     No  |
| If "No", give details below.  |
| Nervous system  |
| Others  |
| Does the applicant have any physical abnormality or restriction of movements in the arms or legs?   |
| □ Yes □ No  |
| If "Yes", give details below.   |
| Is there any evidence of a physical or mental condition (past or present) which could, in your opinion, prevent the applicant from holding a motor sport competition licence? |
| □ Yes □ No  |
| If "Yes", give details below.   |



#### TO THE DOCTEUR AND THE DRIVER

Your practice **stamp** (together with your name and qualifications):



Name (in CAPITAL LETTERS)\_\_\_\_\_

| Qualification(s)_ |  |  |
|-------------------|--|--|
| Address           |  |  |

| Tel.: |  |  |  |
|-------|--|--|--|
|       |  |  |  |

| Email : |  |  |
|---------|--|--|
| _       |  |  |

| Ability Assessment : |  |
|----------------------|--|
|                      |  |

Date :\_\_\_\_

This is to certify that I have examined the applicant in line with this form.

Signature of the Doctor

Signature of the Driver

*If the doctor report cannot be signed and stamped electronically, please submit for the attention of your UIM National Authority a separate certificate with stamp and signature of the doctor.* 

If you as a driver cannot sign electronically the medical sheet, please return a scanned version of the document(s) with your signature.



# DETAILED EXAM RESULTS FOR 2024 XCAT SUPERLICENCE STRESS ECG – PULMONARY AND VISION TESTS

### TO BE SUBMITTED BY DRIVERS (REGARDLESS THE AGE)

Maximal stress ECG and blood pressure profile: electrocardiogram has to be performed every year:

\* on a cycle ergometer starting at 60 or 70 watts and increasing by 30 or 35 watts every two minutes.

The driver must be capable of reaching a minimum power level of 2.5 watts (males) - 2.2 watts (females) per kilogram of body weight during two minutes.

\*or on a treadmill, using a *Bruce protocol* (preliminary warm-up recommended) The driver must be capable of completing at least the entire stage 3 (i.e. 3 minutes at 5.5 km/h (3.4 mph) and 14% gradient).

This stress ECG aims to confirm both cardiovascular health and that the driver reaches the minimal fitness level to compete in powerboating sports. Therefore, we strongly encourage drivers to undergo regular physical training and to perform a maximal stress ECG test.

A written report from the physician (English language) must be enclosed.

**Pulmonary function test** (simple spirometry). Test to be performed every year as part of the yearly medical examination in order to get a superlicence

**Exhaustive ophthalmological check-up**, tested and certified (English language) by a Professional ophthalmologist. Test to be renewed every 2 years and after a skull trauma.

General Recommendation for UIM Superlicence holders to preserve their physical fitness: Cardiovascular training (endurance training) as jogging, cycling, rowing etc. twice a week minimum 20 minutes without any interruption. Any sports activity which has "stand still" during the activity such as soccer, tennis or any ball sport is not suitable for the endurance training but recommended as additional training.

Training to build up muscles for neck and back at least twice a week.



# INFORMATION FOR BODY MASS INDEX (BMI FOR 2024 XCAT SUPERLICENCE

# Drivers with a Body Mass Index (BMI) over 30 kg/m<sup>2</sup> Exemption of BMI rule over 30 kg/m<sup>2</sup>

In order to obtain from UIM an exemption from the "BMI rule", a pilot may prove to the UIM Medical Advisor that his (her) body fat anthropometric characteristics remain within or near the normal range, remaining herewith eligible for obtaining an UIM Superlicence.

To do so, the pilot shall undergo a body composition assessment <u>by using the Dual Emission X-ray Absorptiometry (DXA) method.</u>

The total Body Fat percentage obtained from this measure should remain outside the "obese range" for the gender and age considered (please refer to below Table)

Due to reliability issues, <u>no other body composition measurement methods than DXA will be</u> <u>accepted by UIM</u>.

This procedure must be repeated by the pilot every year prior to applying for the UIM Superlicence, in case the BMI exceeds 30..

All other requirements included in the medical procedure for obtaining an UIM Superlicence must be fulfilled.

BODY FAT RANGES TAKING AGE AND GENDER INTO ACCOUNT

| WOMEN     |           |               |            |          |
|-----------|-----------|---------------|------------|----------|
| Age       | Underfat  | Healthy Range | Overweight | Obese    |
| 20-40 yrs | Under 21% | 21-33%        | 33-39%     | Over 39% |
| 41-60 yrs | Under 23% | 23-35%        | 35-40%     | Over 40% |
| 61-79 yrs | Under 24% | 24-36%        | 36-42%     | Over 42% |

| 61-79 yrs | Under 24% | 24-36%        | 36-42%     | Over 42% |
|-----------|-----------|---------------|------------|----------|
| MEN       |           |               |            |          |
| Age       | Underfat  | Healthy Range | Overweight | Obese    |
| 20-40 yrs | Under 8%  | 8-19%         | 19-25%     | Over 25% |
| 41-60 yrs | Under 11% | 11-22%        | 22-27%     | Over 27% |

13-25%

61-79 yrs

Under 13%

**Over 30%** 

25-30%

#### Page 10 on 14 - 2024 UIM XCAT Superlicence procedure 1, avenue des Castelans - Stade Louis II - Entrée H - MC 98000 Monaco Tél. +377 92 05 25 22 - <u>uim@uim.sport</u> - <u>www.uim.sport</u>



# Drivers over 50 years in the 2024 season

Drivers over 50 years during 2024 season: All **detailed examinations results** required in the UIM medical form and described on page 9 will be submitted to a doctor appointed by UIM.



# Form to be signed and entered with the 2024 XCAT Superlicence application documents to UIM

# ATHLETES CONSENT FORM

As a member of Union Internationale Motonautique (UIM) and/or a participant in an event authorized or recognized by UIM, I hereby declare as follows:

- I acknowledge that I am bound by, and confirm that I shall comply with all of the provisions of the UIM Anti-Doping Rules (as amended from time to time), the World Anti-Doping Code (the "Code") and the International Standards issued by the World Anti-Doping Agency ("WADA"), as amended from time to time, and published on WADA's website.
- 2. I acknowledge the authority of UIM and its member National Federations under the UIM Anti-Doping Rules to enforce, to manage results under, and to impose sanctions in accordance with the UIM Anti-Doping Rules.
- 3. I acknowledge and agree that any dispute arising out of a decision made pursuant to the UIM Anti-Doping Rules, after exhaustion of the process expressly provided for in the UIM Anti-Doping Rules, may be appealed exclusively as provided in Article [13] of the UIM Anti-Doping Rules to an appellate body, which in the case of International-Level Athletes is the Court of Arbitration for Sport (CAS).
- 4. I acknowledge and agree that the decisions of the appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal.
- 5. I understand that:
  - a. my data, such as my name, contact information, birthdate, gender, sport nationality, voluntary medical information, and information derived from my testing sample will be collected and used by UIM and its member National Federations and WADA for antidoping purposes;
  - b. WADA-accredited laboratories will use the anti-doping administration and management system ("ADAMS") to process my laboratory test results for the sole purpose of antidoping, but shall only have access to de-identified, key-coded data that will not disclose my identity;
  - c. I may have certain rights in relation to my *Doping Control*-related data under applicable laws and under WADA's International Standard for the Protection of Privacy and Personal Information (ISPPPI), including rights to access, rectification, restriction, opposition and deletion, and remedies with respect to any unlawful processing of my data, and I may also have a right to lodge a complaint with a national regulator responsible for data protection in my country;
  - d. if I object to the processing of my *Doping Control*-related data or withdraw my consent, it still may be necessary for my UIM and its member National Federations and/or WADA to continue to process (including retain) certain parts of my *Doping Control*-related data to fulfill obligations and responsibilities arising under the Code, International Standards or national anti-doping laws notwithstanding my request; including for the purpose of



investigations or proceedings related to a possible anti-doping rule violations; or to establish, exercise or defend against legal claims involving me, WADA and/or an Anti-Doping Organization.

- e. preventing the processing, including disclosure, of my *Doping Control*-related data may prevent me, WADA or Anti-Doping Organizations from complying with the Code and relevant WADA International Standards, which could have consequences for me, such as an anti-doping rule violation, under the Code;
- f. to the extent that I have any concerns about the processing of my *Doping Control*-related data I may consult with the UIM and/or WADA (privacy@wada-ama.org), as appropriate.
- 6. I understand and agree to the possible creation of my profile in ADAMS, which is hosted by WADA on servers based in Canada, and/or any other authorized National Anti-Doping Organization's similar system for the sharing of information, and to the entry of my *Doping Control*, whereabouts, *Therapeutic Use Exemptions*, *Athlete Biological Passport*, and sanction-related data in such systems for the purposes of anti-doping and as described above. I understand that if I am found to have committed an anti-doping rule violation and receive a sanction as a result, that the respective sanctions, my name, sport, *Prohibited Substance* or *Method*, and/or tribunal decision, may be publically disclosed by UIM and its member National Federations in accordance with the Code. I understand that my information will be retained for the duration as indicated in the ISPPPI.
- 7. I understand and agree that my information may be shared with competent Anti-Doping Organizations and public authorities as required for anti-doping purposes. I understand and agree that persons or parties receiving my information may be located outside the country where I reside, including in Switzerland and Canada, and that in some other countries data protection and privacy laws may not be equivalent to those in my own country. I understand that these entities may rely on and be subject to national anti-doping laws that override my consent or other applicable laws that may require information to be disclosed to local courts, law enforcement, or other public authorities. I can obtain more information on national anti-doping laws from my International Federation or National Anti-Doping Agency.

I have read and understand the present declaration, and I have taken acknowledge of the UIM Anti-Doping Privacy Notice that can be found by <u>clicking here.</u>

Date

Print Name (Last name, First name)

Date of birth (Day/Month/Year) Signature

*If you as a driver cannot sign electronically the athletes consent form, please return a scanned version of the document with your signature.* 



# **UIM Bank references**

Bank L.C.L. (Le Crédit Lyonnais) Monaco La Condamine 98000 Monaco

IBAN N° MC36 3000 2054 3000 0007 0044 N44 BIC N° CRLYMCM1

Please mention on the bank transfer the Superlicence category and the driver's name

Page 14 on 14 - 2024 UIM XCAT Superlicence procedure 1, avenue des Castelans - Stade Louis II - Entrée H - MC 98000 Monaco Tél. +377 92 05 25 22 - <u>uim@uim.sport</u> - <u>www.uim.sport</u>