

DISCLOSURE FORM

Full name:			
Office or position wit	hin the Internationa	al Padel Federa	ation:
			, the Code of Conduct and the Conflict personal and/or commercial interest I
 directorships, partnerships and/or employments with affiliated National Federations, Continental Associations or businesses that are engaged in the sport of padel; 			
 fiduciary or board or similar positions with affiliated National Federations, Continental Associations or businesses that are engaged in the sports of padel; and 			
 Connected Person's¹ relationships with persons involved in the administration and running of the IPF and its businesses. 			
Details of any ongoing or past involvements in the last year.			
Person involved: (myself and/or a Connected Person)	Name of the organisation	Period (from to)	Nature of the involvement
To the best of my knoupdate the information			complete and correct. I undertake to rom the occurrence.
Signature:			Date:

¹ Reference is made to the definition used in the Conflict of Interest Policy