

# Slovak Wushu Championship 2017

/Open competition/

8th of April 2017, Bratislava, Slovakia

## WAIVER OF LIABILITIES

**Federation/school, club**.....

**Name of Participant** .....

**Date of Birth** .....

**Nationality** .....

**Sex** .....

**Passport No.**.....

**Status\*** .....

\*Athlete \*Team Manager \*Coach \*Doctor \*Observer

I, ..... the undersigned, knowingly and without duress, do voluntarily submit my Entry to the Slovak Wushu Championship 2017. In consideration of Slovak Association of Chinese Wushu and School of Chinese Wushu (SACW and SCW) accepting my application, I hereby assume all risks of physical and mental injuries, disabilities and losses, which may result from or in connection with my participation in Slovak Wushu Championship 2017.

Slovak Wushu Championship 2017 is hosted and organized by the Slovak Association of Chinese Wushu and School of Chinese Wushu (hereafter SACW and SCW) collectively referred to as "Organization Committee". Acting for myself, I do hereby release the Organization Committee, its officers, agents, representatives, volunteers, and other related members from all liability relating to injuries and losses that may occur, all claims, actions, suits, and controversies of law or in equity by reason of any matter, cause or thing whatsoever that I may sustain as a result of or in connection with my participation in the Slovak Wushu Championship 2017. I fully understand that all medical attention or treatment given to me by the SACW and SCW, its officers, representatives, volunteers, and all other related members will be first aid only, and hereby release the SACW and SCW, its officers, representatives, volunteers, and all other related members from any liability for such aid. I understand that it is my obligation to provide medical coverage.

I agree to abide by and follow the Rules established by International Wushu Federation and its friendship organizations SACW and SCW and I understand that in case of any protest it must be conducted in accordance with the rules of Arbitration.

I agree that my performance, attendance, and participation at the Slovak Wushu Championship 2017 may be filmed or otherwise recorded or released or telecasted live. I consent to the use of my name, address, voice, poses, pictures and biographical data (complete or part of them) by the SACW and SCW in any form or language, with or without other material, throughout the world, without limitation, for television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised. I do hereby waiver any compensation for aforementioned as well as any future rights to the aforementioned.

I have read and fully understand the waiver listed above. (Signature of Parent or Legal Guardian is required if participant is under 18).

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date