



**BALKAN REGIONAL WUSHU FEDERATION**

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**2nd OPEN BALKAN REGIONAL WUSHU CHAMPIONSHIP 2015**

**16 – 18 October 2015, Burgas, Bulgaria**

**WAIVER OF LIABILITIES**

Athlete’s Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Please read, understand and agree to abide by the following:

1. Clearly understand that the athletes must bear full responsibility for accidents which lead to deaths, injuries and disabilities;
2. The organizer and undertaker of this championship are exempted from any responsibility for occurrence of any accidents and disasters happened during competitions;
3. The athletes ensure not to take any medicines (stimulants) or drugs;
4. The athletes ensure not to be involved in or being suspected of any illegal activities;
5. The athletes ensure they are physically and mentally healthy and suitable to participate in athletic competitions;
6. The athletes should take care of their personal belongings and valuables. The organizer and undertaker are exempted from any responsibilities for any loss, theft or damage happened at the competition venues.
7. Understand that the medical aid provided by the undertaker during the competition is of matter of basic first aid. Any accidents responsibility happened during first aid are borne by the athletes and participating teams.
8. The athletes agree to abide by all competition rules and procedures enacted by the Balkan Regional Wushu Federation. Any objections should be settled in accordance with the arbitration ordinance.
9. All activities, including exercises, competition and others, may be photographed or taken video or broadcasted live on TV. The athletes agree that the Balkan Regional Wushu Federation have unlimited right to use the whole or part of these material, in any language, regardless of whether other materials are included, with individual’s name, address, voice, action, graphics and biographical information to the television, radio, video, media drawings, or any media device, and for use in the future. The athletes will not ask for any recovery or compensation.

I sign here to admit, agree and make sure that I have read, clearly understand and agree to comply with the above listed provisions.

Athlete \_\_\_\_\_

Date: \_\_\_\_\_

Parent (Guardian) \_\_\_\_\_

Date: \_\_\_\_\_

Witness (Team Leader) \_\_\_\_\_

Date: \_\_\_\_\_

Note:

1. This declaration should be filled independently by every athlete.
2. Athletes under 18 must be signed by their parents.
3. The Waiver of Liabilities shall be returned to the Organizing Committee before September 25, 2015.