



the 2nd world martial arts games 2015

WAIVER OF LIABILITIES

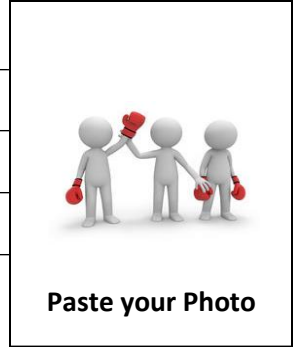
Association: _____

Name of Participant: _____

Date of Birth _____ Sex _____

Country: _____ Passport # _____

Status _____ Athlete / Coach / Manager / Doctor



I, _____ the undersigned, knowingly and without duress, do voluntarily submit my Entry to the 2nd World Martial Arts Games In consideration of the organizing committee accepting my application; I hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the 2nd World Martial Arts Games. The 2nd World Martial Arts Games is Organized by the Martial Arts Authority of India, hereafter they collectively refer as "Organizing Committee", acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release the Organizing Committee, its officers, agents, representatives, volunteers, and other related members from all claims, actions, suits, and controversies at 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 2nd World Martial Arts Games. I fully understand that all medical attention or treatment afforded to me by the Organizing Committee its officers, representatives, volunteers, and all other related members will be of the first aid only, and hereby release the Organizing Committee its officers, representatives, volunteers, and all other related members from any liability for such aid. I understand it is my obligation to obtain medical coverage.

I agree to abide by and follow the Rules established by the Organizing Committee, and I understand that my protest must be conducted in accordance with the rules of Arbitration.

I agree that my performance, attendance, and participation at the 2nd World Martial Arts Games may be filmed or otherwise recorded or released or telecast live. I consent to allow the Organizing Committee use of my name, address, voices, poses, pictures and biographical data concerning full or parts, 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 and I do hereby Waive any compensation in regard thereof 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