

WAKO Switzerland Schweizerischer Kickboxverband Fédération Suisse de Kickboxing Federazione Svizzera di Kickboxing Swiss Kickboxing Federation



## The preconditions for participation at the ring sport disciplines from WAKO Switzerland

## **Declaration on insurance / health / doping**

## This document must be completed, signed and returned when weigh-in. Without this document the weigh-in will be refused and you are NOT allowed to fight!

All fighters must be insured against the consequences of a sports accident. The responsibility of an adequate insurance cover (SUVA, accident insurance) lies in responsibility of the fighter only. The WAKO Switzerland association and the tournament organizer assume no liability for accidents.

Full contact competitions are valid according to Art. 39 UVG (Federal Law on Accident Insurance) as socalled risk sports. According to Art. 50 UVV (Ordinance on Accident Insurance) insurances may restrict benefits in the event of non-occupational accidents.

Fighters who can't provide the required sport-specific performances without endangering their health, must not be sent to the full contact disciplines of the WAKO SWITZERLAND. Participation in the ring sports disciplines is voluntary and at your own risk.

Fighters allow that in case of an injury the doctor / paramedics can remove the clothing in the case of treatment. This is independent of religion or other beliefs.

Any ingestion of drugs or other prohibited substances that are on the doping list (www.antidoping.ch) pose a serious risk to the health of the fighters and are forbidden. The regulations of the doping status of Swiss Olympic apply in principle to all Swiss sportsmen and -women who are a member of a Swiss Olympic affiliated association or an affiliated club, who are licensed to one of these groupings or participate in competitions that have a connection to one of these groupings.

With my signature, I confirm, as a prerequisite for participation, that I have read and understood the abovementioned explanations to the insurance, health, Swiss Olympic Doping Statute and the Swiss Olympic Disciplinary Commission.

## Please fill in all fields:

Date of Tournament, Tournament description:

Name of club:
Salutation, first name, last name:
Address, house number:
Postcode, place of residence:
Date of birth:
Phone number (mobile phone):
Signature fighter or legal representative:



