



# WORLD ASSOCIATION OF KICKBOXING ORGANIZATIONS

## WAKO GB LIABILITY WAIVER

Event: \_\_\_\_\_

Please read the below information carefully, complete the requested information, date and sign under your name. This form must be completed and returned to a Weight Control official when registering.

Name: \_\_\_\_\_ Sports ID: \_\_\_\_\_

DOB: \_\_\_\_\_ E mail Address: \_\_\_\_\_

Weight Class: \_\_\_\_\_ kg Discipline(s): \_\_\_\_\_

### LIABILITY WAIVER:

I, the undersigned hereby confirm and agree to the following:

- I have adequate Medical insurance to cover my participation during this event;
- I, the undersigned, do hereby declared that I am currently in good physical condition and I have not suffered from any injury, infection or disability label to affect my capacity to compete in the current WAKO GB event;
- I release the event promoter, WAKO GB, WAKO GB's officers, the WAKO GB organising committee, the WAKO GB Board, WAKO GB members and its servants/agents, volunteer committee and referees from any claims and any loss, damage sustained while participating in the above mention event;
- I understand and I am fully aware that I am participating in a contact sport and may in the normal course of events sustain an injury while competing;
- **In case of emergency (injuries, cuts etc.) and in any case whenever it is required by the WAKO Medical Rules, I agree that the medical staff on duty can proceed to any examination they deem opportune;**
- therefore, I assume full responsibility for all of my actions during and connected with this event I also agree that my attendance and or performance may be photographed, filmed or taped and used by WAKO, event promoter and/or their respective authorized agents. I waive any compensation thereof.

I, the undersigned, hereby authorize:

- free of charge, without time limits, any publication and/or dissemination of my pictures and videos on WAKO GB website, on any social channel (Facebook, etc.), on printed paper and/or on any other means of communication;
- the storage of the photos and videos in the WAKO GB's archives and acknowledges that the pictures and the videos will be used for informational and promotional purposes.
- the processing of your personal data for the management of all activities related to the organization of the event.

This authorization may be revoked at any time by written communication to be sent by e-mail to the address [office@wakogb.com](mailto:office@wakogb.com)

I hereby undertake and agree to abide all WAKO Rules and Regulations including WADA / WAKO Anti-Doping rules and agree to be tested if requested to do so. I will treat my fellow competitors, officials and referees with Respect, Integrity, Fair Play and Honour.

I also declare that, pursuant to Regulation (EU) 679/2016 (GDPR), I am aware that the data collected through this document will be processed for the purposes described in WAKO Privacy Notice and that I have taken vision of the latter pursuant to art.13 GDPR.

**I declare to have read and understood the content of this document.**

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

For a kickboxer under the age of 18 signature of Parent or Legal Guardian: \_\_\_\_\_

*Parent's or Legal Guardian's signature*

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