

和道会



World Wado Kai Championships 2008

Acknowledgment and Release for Canadian participants

By his/her signature below, the Tournament Competitor ('Competitor') or Parent/Guardian if under 19 year of age, hereby releases CZWKA, Karate BC, its employees, agents, successors, assigns, directors or volunteers from any and all liabilities arising out of or connected with any loss, damage, injury or expense suffered sustained by the Tournament Competitor as a consequence of or in connection with his/her participation in the Tournament Competition or any activity related thereto. I authorize the organizers of the event to use electronic and other images, photos and the names of our athletes and other members of our delegation in sport activities and publications related to the event without fiscal compensation to myself.

Results from this event may be published in media. Please indicate if you do not want your name included in publication of this event. I wish my name to be excluded from publication of this event _____ Signature

Dated this _____ day of _____, _____ Provincial Membership # _____

BLACK BELT INSTRUCTOR:

TOURNAMENT COMPETITOR:

Name

Name

Signature

Signature (Parent/Guardian if under 19)

Address

Address

In the event of injury, a competitor's information may be shared with health care providers assisting that athlete. Signing this form gives consent to such use of a competitor's personal information.

