

ACKNOWLEDGEMENT, WAIVER INDEMNITY FORM

READ CAREFULLY BEFORE SIGNING AND POTENTIAL CLAIMS BASED UPON NEGLIGENCE OR OTHER CLAIMED MISCONDUCT (MISCONDUCT HEREINAFTER KNOWN AS "AWLR").

1. I acknowledge a Triathlon, Aquathlon and/or multi-sport event is an extreme test of a person's physical and mental limits, and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, pollution, temperature, currents and waves. Weather, condition of athletes' equipment, vehicle traffic, actions of participants, volunteers, spectators and/or producers of the event, and lack of hydration. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN THIS RACE.
2. I certify that I am physically fit, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person.
3. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:-
 - a. WAIVER, RELEASE AND DISCHARGE from any and all liability for my death, disability, personal injury, property damage, property theft or action of any kind which may hereinafter occur to me as a result of my participation in this event or traveling to and from this event THE FOLLOWING PERSONS OR ENTITIES: Indian Triathlon Federation, State Association, Championship Organising Committee, event sponsors, event producers, race directors, event volunteers, all cities, countries, districts and / or states in which said event may be staged or which segments of said event may be run, and their (its) respective Officers, directors, employees, representatives, agents and volunteers.
 - b. INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result or any of my actions during this race.
4. I hereby consent to receive medical treatment which may be deemed advisable in any event of injury, accident and/or illness during the race
5. I understand that at the race or related activities I may be photographed. I agreed to allow my photo, video or files likeness to be used for any legitimate purpose by the event producer(s), event sponsor(s) and/or assigns.
6. This AWLR shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.
7. I understand that drafting (riding in the slipstream of another cyclist) is cheating and this

practice is illegal in the race. I undertake to participate as a true sportsman, and to compete without committing any sort/mode of cheating in this Championship. If I am found guilty in this regard, I understand that I am liable for disqualification.

- 8. I agree to abide by the race rules and understand that I should wear a buckled safety standard approved helmet for the cycle section.
- 9. I hereby certify that I am Years of age or older.
I have read this document, and I understand its contents.

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Athlete Signature Athlete Name Date

(PARENT OR GUARDIAN MUST READ WAIVER AND SIGN IF COMPETITOR IS UNDER 18 YEARS OF AGE)

If Parent/Guardian, signed on behalf

(Parent Signature, if athlete is under the age of 18)