

WAIVER OF RIGHT DISCLOSURE AND RESPONSIBILITY COMMITMENT



Last name and name:

Birthday: (d)...../(m)...../(y)..... FIMBA License:

1. GENERAL WAIVER: As a condition of my participation in this 3x3 championship, I hereby waive, on my own behalf or estate or personal representative, any and all rights, cause and claims for loss, damages or mi dead caused by negligence, active or passive, of the following; any officers, directors, agents, representatives, volunteers or employees of the Organizing Committee of this championship, or of the municipality and national government, or of FIMBA, or the host facilities, meet sponsors, meet committees, attending medical personnel, or any individuals officiating at the meets or supervising such activities. I registered voluntary in this 3x3 championship, and I am the only person responsible for any material or moral damage, injuries, permanent disability and/or death, that I cause for the others or to my person. I realize and forever discharge of and from all manner of actions, cause of actions, claims of liability or demands in the present or future against them, for or by reason of entering and competing.

2. MEDIA RELEASE: I hereby grant the Organizing Committee of this 3x3 championship, FIMBA and their licenses the unconditional right to use, record, publish, broadcast, and otherwise exploit at this discretion in any form of media, art, advertising, trade, internet, visual documentary, promotional material, merchandise or film coverage of any kind, my performance in the games and to use my name, likeness, voice and biographical in connection therewith, without compensation to me. I also waive the right to inspect and/or approve any product or the copy that may be used in connection therewith, or the use to which it may be applied.

3. OBSERVATION OF RULES: I agree to abide by all rules and regulation issued for this tournament, for the category, and observes all written and oral instructions given by authorized personnel of the Organizing Committee, referees and FIMBA. I agree that failure to comply with the designated rules may result in my disqualification or expel from the games.

4. PROOF OF AGE: I acknowledge and agree that the players in the 3x3 championship must have reached the age category before or during this calendar year. I accept that I will be required to provide a proof of age when it is required.

5. DECLARATION OF HEALTH: I declare as a player of Maxibasketball category that I am in good health condition to participate and compete in this tournament where I voluntarily have registered. I acknowledge that I am aware of all risks inherent in masters training and competition and that I accept personal responsibility for any injury, accident or illness, including possible permanent disability and death that I may suffer during the tournament.

6. MEDICAL RELEASE: In event I sustain an injury or illness while participating in the games, I hereby authorize attending medical personnel to perform and administer such emergency and non-emergency medical attention, as they, in their absolute discretion, deem necessary or desirable. I also consent to emergency and non-emergency treatment for myself and attending medical personnel to delegate any necessary treatment to any other medical practitioner nominated for the purpose. I hereby release all attending medical personnel from any and all claims, damages, and liability arising out of acts or omissions in connection with delivery of emergency or non-emergency medical treatment to me. I declare that I am responsible for the payment of a medical assistance to include medical transport, medical costs and other medical services. The Organization Committee is not accountable for my injuries, damages and/or my health consequences.

7. I hereby acknowledge that I am signing this document voluntarily and I understand the implications of my signature and agree to the conditions as describe above. By signing below, I certify that my answers and statements are true and complete to the best of my knowledge and belief. I understand the present waiver is under this country laws and in any case I hereby accept the justice of this city.

Date: (d) ... / (m)..../20..

Print name: Signature: