

Name and Nationality:

Academy:

Weight class / Category:

ADCC EUROPEAN, MIDDLE EAST & AFRICAN CHAMPIONSHIP 2023

WAIVER RELEASE AND ASSUMPTION OF RISK Please read carefully. This document affects your legal rights. PRINT NAME AT TOP, SIGN AT BOTTOM.

I _____ hereby submit my application for participation in **ADCC EUROPEAN, MIDDLE EAST & AFRICAN CHAMPIONSHIP 2023, WARSAW, Poland.**

I hereby assume full responsibility and liability for all damages, injuries and losses that I may sustain or incur while participating in or watching the tournament. I realize that serious injury is commonplace in martial arts tournaments such as the one I am hereby entering; and that even death is a very real possibility. I also realize that if I am injured, I might be disfigured, disabled and/or rendered unable to work again. I realize that regardless of how this consequences might occur - whether it be the result of an opponent's actions, the action or inaction of a referee, the condition of the mats used, the conduct of a non-participant or some other reason - By entering into this agreement I accept the risk of entering and being present at the tournament and give up and waive all claims I or anyone acting on my behalf or through me might have against **Stowarzyszenie Sportów i Sztuk Walki Alliance (NIP 7811787807)** and **ADCC Poland**, operators, sponsors, officials, participants, non-participants, **ARENA URSYNÓW** and their employees and representatives for any injury regardless of its nature, effect or affect on me as a result of my participation and/or presence at the tournament. I authorize, and agree to hold harmless, whatever medical personnel that may be present at the tournament to take any action necessary, should I become injured. I further understand that news media and others might cover the tournament and that it may also be videotaped or otherwise shown to audiences around the world. I hereby consent to having my likeness shown, publicized, commented and/or reported on; and I do not expect to, and in fact waive any compensation I might otherwise be entitled to as a result thereof. I represent that I am in good health; that I am not presently, nor will I participate while under the influence of any drug or medication; that no one affiliated with this tournament has encouraged me to enter or made any representations regarding my fitness or ability to participate; that I have read and understood every provision of this release; and that I am legally competent to and freely enter into this waiver, release and assumption of risk agreement.

SIGNATURE DATE

For minors:

I, _____, hereby certify that I am **Parent or legal guardian of the above named minor**; that I have read and understood every provision of this release; and that I am legally competent to and freely enter into this waiver, release and assumption of risk agreement on behalf of the minor and myself.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

