

Appendix 5

French Wushu Kungfu Association (AFWK) Waiver of Liabilities

Federation or Association		(ID Photo)
Name of Participant:		
Name of Parent/Legal Guardian (if applicable):		
Date of Birth:		
Age:		
Nationality		
Gender		
Passport No.:		
Role of Participants: <input type="checkbox"/> Athlete <input type="checkbox"/> Team Manager/Leader <input type="checkbox"/> Coach <input type="checkbox"/> Doctor		

I, the undersigned, knowingly and without duress, do voluntarily submit my Entry to the 1st French Health Qigong Open. The 1st French Health Qigong Open is hosted by French Wushu Kungfu Association (AFWK). In consideration of the AFWK accepting my application, I hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the 1st French Health Qigong Open. Acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release the AFWK, its officers, agents, representatives, volunteers, judges and referees and other related members from all claims, actions, suits, and controversies at law or in equity by reason of any matter, cause or thing whatsoever that I may sustain as a result of or in connection with my participation in the 1st French Health Qigong Open.

I agree to abide by and follow the Rules established by the AFWK. I agree to abide by the relevant regulations of the Covid-19 prevention and will absolutely cooperate with the virus prevention work related to the competition. I agree that I will conduct myself in a professional and courteous manner at all times and to be subject to penalties and sanctions for violations related thereto. I understand that my protest must be conducted in accordance with the Rules of Arbitration. I agree that my performance, attendance, and participation at the 1st French Health Qigong Open may be filmed or otherwise recorded or released or telecast live. I consent to allow the AFWK use of my name, address, voices, poses, pictures and biographical data concerning full or parts, in any form or language, with or without other material, throughout the world, without limitation, for television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised and I do hereby waive any compensation in regard thereof as well as any future rights to the aforementioned.

I have read and fully understand the waiver stated above.

Signature of Participant	Signature of Parent/Legal Guardian	Date