



## COMPETITOR WAIVER & RELEASE FORM

2015 NZCAF Christchurch Regional Competition

One form to be completed for each competitor entering.

Waivers need to be presented at registration.

All athletes MUST submit a waiver in order to compete

I, \_\_\_\_\_ (print competitors name) the undersigned, my heirs, successors and assigns do hereby waive and release NZCAF, their event organisers, all those assisting at the event, and any sponsors or their representatives connected with the competition, from all claims of damages arising from participation in, and travel to and from the **2015 Christchurch Regional Competition**, including, without limitation, personal injury and death.

My signature on this form certifies that I have read and understood the conditions of entry of the competition and agree to abide by the organiser's rules and release from liability.

I also give permission for photographs and video footage to be taken by official event staff, and give permission to NZCAF to use any official photography or video footage taken during the event for promotional use

I agree to abide by the NZCAF & FISAF Technical Regulations and follow the instructions of event officials.

Signed \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*(to be signed by Parent/Guardian if participant is under the age of 16 years of age)*

\_\_\_\_\_  
**Parent/Guardian name (if applicable)**

### OFFICE USE ONLY

Date		Waiver		Payment		Entered	
Notes							