

ASIA OPEN CHAMPIONSHIP 2015 11th - 13th December 2015 www.chitfmalaysia.yahoo.com



ASIA OPEN CHAMPIONSHIP 2015

PARTICIPATION AGREEMENT,
ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY

You have requested to participate in an activity organized by **Malaysia Chan Hun International Taekwon-Do Federation** (**The organizer**) All Taekwondo activities involve risks and it is important for you to have information about your selected event and to provide the organizer with information about yourself before participating in this championship. This Participation Agreement, Assumption of Risk, and Release and Waiver of Liability (Hereafter "Participation Agreement") must be read carefully and signed by all participants who take part in the events organized under this Championship.

PLEASE READ THIS AGREEMENT CAREFULLY.

IT IS A LEGAL CONTRACT AND AFFECTS ANY RIGHTS YOU MAY HAVE IF YOU (OR YOUR CHILD) ARE INJURED OR OTHERWISE SUFFER DAMAGES WHILE PARTICIPATING IN ASIA OPEN CHAMPSIONSHIPS 2015.

In consideration of the organizer allowing me to participate in any way, including any Taekwondo tournament, practice, clinic, and related events and activities and travel to and from events or activities of the organizer I agree and understand the following:

<u>Nature of Taekwondo Activity:</u> Taekwondo is a contact sport. Contact sports are strenuous and require educational information about the necessary skills involved before the activity may be completed in the safest manner possible. Prior to your participation in any Taekwondo events, you will receive event information and have the opportunity to ask any questions you may have.

<u>Inherent Risks and Dangers of Taekwondo Activity:</u> I understand and appreciate that the risks and dangers are inherent when participating in contact sport activities. I acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, including permanent disability or death, and severe social and economic losses due not only to my own actions, inaction or negligence, but also to the actions,

inaction or negligence of others, the rules of the sport of Taekwondo, or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time. I understand that these risks and dangers could result in property damage and personal injury, including death, and I agree to accept all risks associated with the sport of Taekwondo and this activity whether present or future, known or unknown, arising from, or as a result of my voluntary participation in this championship.

Association/	Club M	ember	ship: Please indicate if	you are a currer	ent member of a Taekwondo association/Club providing excess medical coverage
to participate.					
Circle One:	Yes	No	If yes, please provide	e the association/	n/Club name
Medical Eme	rgency	Permi	ssion and Financial F	esponsibility fo	or Medical Treatment
The health hi	story pr	ovided	for the participant is c	orrect and comp	plete to my knowledge. If an injury or other medical condition occurs or arises, I
hereby give p	ermissi	on to tl	ne organizer or any me	edical certified vo	olunteer to provide routine health care and seek emergency treatment including
x-rays or rout	ine test	s. I agr	ee to the release of an	y record necessa	sary for treatment, referral, billing or insurance purposes. I understand that the
organizer of	this ch	ampior	nship does NOT carry	any health insu	surance for participants and that I am financially responsible for charges and
(or if the pare	nt is not	t availal	ble to make a decision	for a child particip	health care unit. In the event of an emergency where I cannot decide for myself cipant), I give permission to the physician/hospital selected by the organizer or any me (my child), including hospitalization
Full Name: _			Initial:	Date:	
Behavior Ex	pectati	ons of	the Participant: Su	ccessful participa	pation in Taekwondo activities requires all participants to abide by rules and
•		•	. •	•	ity selected by the participant. I know it is most important to follow the directions of
	. ,			•	have the responsibility to help make the championship a safe experience for me
•	-		-		es to the standards set by the organizer.
	-		• • •	_	julations for the organizer. If I violate any of the rules and regulations, I
understand t	hat my	partici	pation in the champic	onship may be to	terminated.
Full Name:			Initial:	Date:	
Health Cond	lition of	f the P	articipant: Participant	s must be health	thy and reasonably fit to safely participate in this championship. By signing this

participation agreement, you agree:

- That you have the physical fitness and ability to participate safely in the specified event organized by the organizer. In addition, you will participate in the specified events within your ability and skill level.
- To inform the program leader of any medication, ailment, condition, or injury that may affect your performance in the activity.
- That you must supply your own health insurance and will bear all financial responsibility for any medical treatment arising from participation in the Taekwondo activity.

Full Name:	Initial:	Date:	
-	-	•	sumption of Risk, and Release and Waiver of Liability shall be governed by and any lawsuits arising from or incident to this Agreement.
I, (participant) ASSUM	IE THE OBVIOUS	S AND THE INHERENT RISKS AND LIABILITIES of participating in a Taekwondo activity
or event and hereby RELEASE, W	AIVE, DISCHARG	E AND COVENA	NT NOT TO SUE the organizer, the Malaysia government, Chan Hun International
Taekwondo Federation(CHITF), CHIT	F Malaysia,) and a	ny of the officers,	servants, agents and employees of the above-mentioned entities (hereinafter referred to
as RELEASEES) for any liability, clai	m and/or cause of a	action arising out	of or related to any loss, damage or injury, including death, that occurs as a result of my
participation in the above-described a	activities.		
I agree to INDEMNIFY AND HOLD H	ARMLESS the REL	EASEES whether	r injury is caused by my negligence, the negligence of the RELEASEES or the negligence
of any third party. I further agree that t	his Participation Ag	reement shall bind	d the members of my family and spouse, if I am alive, and my heirs, assigns and personal
representatives, if I am deceased, an	d shall be deemed	as a RELEASE, W	VAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES.
I hereby further agree that this Partici	pation Agreement	shall be construed	d in accordance with the laws of the State of Iowa.
By signing this Participation Agreeme	ent, I state that I hav	re read and unders	stand the conditions set forth in it, that I agree to all conditions set forth herein, and that I
Date		Name (pleas	e print)

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	Signature	
•	Signature of Parent or Guardian (if under 18)	

NOTE: This Participation Agreement, Assumption of Risk, and Release and Waiver of Liability must be signed by both the participant and the participant's legal guardian if the participant is not of legal age.

Photo Release

The organizer photographs taken during this championship for the purpose of promoting, reporting on any social media, websites etc including but not limited to:

- a. CHITF official website
- b. Facebook /Tweeter / Linkedin / Wechat / Whatsapp
- c. Printed publications or posters
- d. Press release
- e. Others

Registration for participation in the Asia Open Championship 2015

• Date: 11 - 13 December 2015

Registration: 11 December 2015 - 8:00-12:30am(official Hotel)

• Championship Venue: Dewan S.J.K. (c)Pay Teck, Melaka

Registration Fee:

- USD 50 for individual event
- USD 30 for couple pattern event
- USD 80 for team event

If you have further questions, kindly contact:

Email: chitfmalaysia@yahoo.com 1735042966@qq.com