



2016 Hong Kong Inter Schools Aquathlon Championship 香港校際水陸兩項錦標賽

* This form is for use by Team/School Entry only.

ATHLETIC WAIVER FORM 運動員免責聲明

Name of School: _____
就讀學校

Name of Student: _____
學生姓名

I ACKNOWLEDGE that participating in the Triathlon includes an element of risk and that I should not participate unless I am medically able and physically trained. I assume any and all risks associated with this activity including but not limited to injury, illness, traveling to and from the activity and the condition of the premises. 我確認參加是次三項鐵人比賽存在風險因素，而我保證本人健康良好及有足夠的技術和訓練並能應付是次比賽至距離。我願意承擔是次活動包括但不限於傷害，疾病，往返活動和場地相關的任何情況之風險。

I WAIVE, RELEASE and DISCHARGE the Event Organizer, Sponsors, and any medical staff or volunteers and any individuals or agents, organizations participating in, controlling, officiating, involved in or contributing to the conduct or organizing or watching the Triathlon from any and all claims, losses, liabilities for death, personal injury, partial or permanent disability, property damage, illness, medical or hospital bills, theft or damage of any kind, including economic loss, which may however exist or arise in the future or relate to my participation in or traveling to and from the Triathlon, or arising out of the risks I have assumed in participating in the Triathlon as set out above whether or not caused by negligence of any person. 並本人明白及同意如因參與及/或觀看此活動而引致之財物損失、身體健康狀況有異或傷亡，主辦機構及/或其合辦、贊助、支持、承包機構、工作人員、醫護人員均無需負責。

Signature 簽名

Signature of Parent/Legal Guardian if student is under 18 父母或監護人簽名(十八歲以下學生)

Name of Parent/Legal Guardian 父母或監護人姓名

Date 日期