



W.A.S.C.O. OPEN WORLD CHAMPIONSHIPS 2009
5 -10 May 2009 PULA - Croatia



Registration FORMS

Country _____

Team _____

Chief Delegation _____ Passport N° _____

PARTICIPATION FEES:

Individuals' competition fees:

One event Euro 35,00
Two events Euro 35,00+ Euro 15,00 = Euro 50,00
Three events Euro 35,00+15,00+10,00 = Euro 60,00
Four events Euro 35,00+15,00+10,00+5,00 = Euro 65,00
any subsequent event + Euro 5,00

Teams' competition fees:

One event Euro 200,00 each team

Individual competitors can compete in several events, for example:

Individual light contact competitions + individual semi contact competitions + individual power breaking competitions + individual patterns competitions, etc.



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WAIVER

I AGREE TO WAIVE ALL CLAIMS AGAINST ANY PERSON(S) CONNECTED WITH THE CHAMPIONSHIP, FOR ANY INJURY OUR DELEGATION MAY SUSTAIN DURING THIS CHAMPIONSHIP. I ALSO RELEASE ANY PERSONS(S) CONNECTED WITH THE CHAMPIONSHIP FOR ALL CLAIMS OF DAMAGES, DEMANDS AND ACTIONS IN ANY MANNER DUE TO ANY PERSONAL INJURIES, PROPERTY DAMAGE OR DEATH SUSTAINED AS A RESULT OF MY TRAVELING TO AND FROM AND OUR PARTICIPATION IN SAID CHAMPIONSHIP. I ALSO ATTEST AND VERIFY THAT MYSELF AND ALL PERSONS OF MY DELEGATION ARE IN VERY GOOD HEALTH, WE DO NOT SUFFER FROM ANY ILLNESS, DISEASE OR ANY MENTAL AND PHYSICAL DISORDER WHICH MIGHT BE OR BECOME AGGRAVATED BY ENTERING IN THIS CHAMPIONSHIP.

I HOLD MYSELF RESPONSIBLE FOR ANY ACTIONS OF MY DELEGATION AND PROMISE TO ACT IN ACCORDING TO THE RULES AND REGULATIONS OF THE CHAMPIONSHIP. I DECLARE ALSO THAT ALL COMPONENTS OF MY DELEGATION HAVE THEIR OWN PERSONAL INSURANCE AND MEDICAL AUTHORIZATION TO PARTICIPATE IN THIS CHAMPIONSHIP.

Chief Delegation Signature _____

Date: _____

Place: _____