

Entry Form Team Relay

ITU World Championships Wintertriathlon

Feb 14th to 16th, 2003 Oberstaufen/Germany

Entry Cut-Off Date 23.01.2003

Elite Women	Elite Men	Junior

Please tick your competition!

Three Athlets per Relay!

1.)Name: _____

2.)Name: _____

3.)Name: _____

Federation Address: _____

Nationality: _____ **Sex:** _____

Phone Number: _____

Fax Number: _____

E-mail address: _____

Race Regulations and Liability

I hereby agree with my signature to comply with all rules and regulations of the ITU and event instructions of the organizing committee of the Winter-Triathlon World Championships and its operating officers. I acknowledge, that I have sole responsibility for my possessions and athletic Equipment during the wintertriathlon event and its related activities. I hereby attest and verify, that I am physically fit and my physical condition has been verified by a licensed medical doctor. In an event of race cancellation, beyond of the control of the organizer, the entry fee is not refundable. I hereby assume full responsibility for risk of bodily injury, death or property damage due to negligence of releases or otherwise while in or upon the restricted area and/or while competing, officiating in, observing, working for, or for any purpose participating in the event. For all legal affairs around the event there will be only german law as the only valid legal system. The location of the court will be Kempten/Allgäu. I hereby release, waive, discharge and covenant not to sue the ITU in Canada or elsewhere outside of Germany, because of any liability cases made during the world championships in Germany. With my above signature, I declare that I have read and understood this release and waiver of liability and indemnity agreement.



Date, Federation Signature & Stamp:
