



## **IMPORTANT INSTRUCTIONS**

1. Bring your Original & Xerox Aadhar Card.
2. Health Certificate (Medical Fitness Certificate) By MBBS Doctor.
3. Passport Size Photograph (5 Copy).
4. Be ready for the on arrival weighing on 19<sup>th</sup> June 2018 morning 7.00 AM onwards and also DAILY WEIGHING system.

Arrival from Kolkata - 17<sup>th</sup> June, 2018, 18:00 from HOWRAH JN  
Departure from Jalandhar City – 24<sup>th</sup> June, 2018, 12:100

# 5th Federation Cup Wushu Championships 2018

19<sup>th</sup> to 24<sup>th</sup> June 2018 at Lovely Professional University, Jalandhar, Punjab

Organized By

**Wushu Association of Punjab**

Under Auspicious of

**Wushu Association of India**



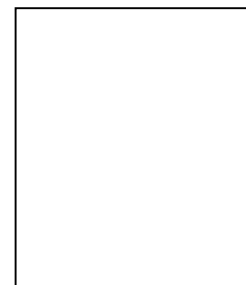
## WAIVER OF LIABILITIES

State Association – **WUSHU ASSOCIATION OF WEST BENGAL**

Name of Participant \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Status \_\_\_\_\_

*\* Athlete \* Team Manager \* Coach*



I, \_\_\_\_\_ the undersigned, knowingly and without duress, do voluntarily submit my Entry to the 5th Federation Cup Wushu Championships. In consideration of Wushu Association of India accepting my application, I hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the 5th Federation Cup Wushu Championships. **The 5th Federation Cup Wushu Championships is hosted by Wushu Association of Punjab and organized by the Wushu Association of India, hereafter W.A.I collectively refer as "Organizing Committee", acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release the Organizing Committee, its officers, agents, representatives, volunteers, and other related members from all claims, actions, suits, and controversies at law or in equity by reason of any matter, cause or thing whatsoever that I may sustain as a result of or in connection with my participation in the 5th Federation Cup Wushu Championships. I fully understand that all medical attention or treatment afforded to me by the Wushu Association of India its officers, representatives, volunteers, and all other related members will be of the first aid only, and hereby release the Wushu Association of India its officers, representatives, volunteers, and all other related members from any liability for such aid. I understand it is my obligation to obtain medical coverage.**

I agree to abide by and follow the Rules established by the Wushu Association of India and I understand that my protest must be conducted in accordance with the rules of Arbitration.

I agree that my performance, attendance, and participation at the 5th Federation Cup Wushu Championships may be filmed or otherwise recorded or released or telecast live. I consent to use Wushu Association of India my name, address, voices, poses, pictures and biographical data concerning full or parts, in any form or language, with or without other material, throughout the world, without limitation, for television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised and I do hereby Waive any compensation in regard thereof as well as any future rights to the aforementioned.

I have read and fully understand the waiver listed above.

**(Signature of Parent or Legal Guardian is required if participant is under 18)**

Signature of Participant

Signature of Parent/Guardian

Date