Please send this form to the **WTF Sport Department** (e-mail to Beach2017@wtf.org, and wtfbeach@taekwondoetu.org) by no later than April **21, 2017**

|  |  |  |
| --- | --- | --- |
| Name | **Name** | **Last Name** |
|  |  |
| **Nationality** |  | **Gender** | **M( ) / F ( )** |
| **Date of Birth** | **(mm / dd / yy)** |
| **Kukkiwon Poom or Dan** | **Please send me photo copy of your Poom or Dan Card****(Technical Breaking Event ONLY!)** |
| **Events** | **I hereby submit my application to attend the:** **Technical Breaking Event** **Free Style Dynamic Kicks & Breaking Challenge** **Both****to be conducted by WTF.** |
| **Subdivision of****Technical Breaking** |  **Jumping Multiple Kick** |
|  **Spinning Kick** |
|  **Free Style Breaking** |
|  **High Kick Performance** |
| **E-mail** |  |

**◦ Please contact yourself with “GEM Travel Rhodes” for your Hotel Reservation.**

**Email:** **avramios@gemtravel.gr**

Date:

Signature:

**WTF World Taekwondo Beach Championships Rhodes 2017**

**PERSONAL INDEMNIFICATION FORM**

THIS INDEMNIFICATION, HOLD HARMLESS, RELEASE AND CONSENT NOT TO SUE executed this on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert date of signing).

I, the undersigned, certify that I will indemnify, hold harmless and release the World Taekwondo Federation and the Organizing Committee, its executive board members, directors, officers, members, employees, consultants, agents, attorneys, contractors (including without limitation sponsors, suppliers, licensees and other representatives (each, an “Indemnities” and, collectively, “Indemnities”), from and against any and all damages, injuries, penalties, fines, claims, suits, liabilities, costs, attorneys’ fees court costs and expenses of every kind and nature suffered by or asserted against the Indemnities as a direct or indirect result of participating in the WTF World Taekwondo Beach Championships Rhodes 2017 in the broadest sense of the word.

By signing and submitting the form below, I accept and agree to the terms and covenants contained in this Indemnification, hold harmless, release and consent not to sue.

I verify that by signing and submitting this form, that I have read and agree to all of the terms and conditions provided above.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature:**

In case the person involved is a minor, the legal guardian has to sign:

**Name:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relation towards the minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature:**

Please send this form to: wtfbeach@taekwondoetu.org

**WTF World Taekwondo Beach Championships Rhodes 2017**

**LIABILITY DECLARATION**

(only for under aged competitiors)

My name:

I live in:

I am the parent/guardian of:

Date of birth (competitor): \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

I declare that I accept the participation of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at the **2017 WTF World Taekwondo Beach Championships, 5-6/5/2017, Rhodes, Greece** and that I accept all parts of the **official invitation** of this tournament.

For physical reasons nothing speaks against a **participation and** I understand that all competitors are considered to participate at their own **risk.** European Taekwondo Union assume **no responsibility for** any damages, injuries or losses. All contestants **must bring their own documents** and the forms or any medical insurance **in Greece.**

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the parents/legal guardian:

**Please, send this form to e-mail:** wtfbeach@taekwondoetu.org