



WORLD TRANSPLANT GAMES REGISTRATION FORM

STEP 1- GENERAL WAIVER

Part A

I hereby agree to information being released to the media and to being interviewed or photographed in connection with my participation in the World Transplant Games 2009

Part B

In consideration for the opportunity to participate in the World Transplant Games on the Gold Coast in 2009

I _____ (print name in full) on behalf of myself, my next-of-kin, my heirs, Executors, administrators and assigns, hereby release and discharge Transplant Australia and the World Transplant Games Federation (WTGF) other venue representatives and agents for any injury, loss, or damage to my person or property and all expenses and costs, however caused, arising out of, or in connection with my participation in the World Transplant Games to be held on the Gold Coast in 2009 and associated activities and notwithstanding that the same may be contributed to, has been contributed to or occasioned by the negligence of Transplant Australia and WTGF.

I am aware and agree that the release and discharge given by me to Transplant Australia and the WTGF includes their officers, directors, employees, representatives and agents.

I have discussed the possibility of any adverse effects of the games on my health with my physician who is in agreement with my decision to participate. I also confirm that I have been training for these games and am physically fit (competitors only).

Executed by:

Name in Full: _____

Date: _____ Signed: _____

Name of Witness & Relationship: _____

Date: _____ Signed: _____