



SURF LIFE SAVING®
NEW ZEALAND

Nationals 2018 Legal Guardians Acknowledgement of Risk and Liability Waiver for an Athlete. (U18)

I (name in full)

confirm that I am the legal guardian for

..... (the athletes name) and give

permission for this athlete to compete in the Nationals 2018 events that this athlete is registered for, knowing they currently have the following injury / illness.

.....

.....(describe injury)

By providing permission for this athlete to compete, I acknowledge that there is a risk that this injury may be further exacerbated due to their participation, and I accept full responsibility for any and all outcomes that may eventuate from their participation in Nationals.

Additionally I accept full liability for any loss or damage that may result from this athlete's participation in Nationals 2018, and indemnify Surf Life Saving New Zealand (SLSNZ) for any loss or liability claim directly arising from this athlete's participation.

I accept that SLSNZ reserves the right to exclude this athlete from participation in selected events on the grounds that this athlete's injury may potentially place other competitors at risk.

Signature:

Date:/...../.....



Surf Life Saving New Zealand

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