

2018 BINTAN TRIATHLON The following information is requested in case of medical emergency evacuation to Singapore.

BIB NUMBER:		MOBILE NUMBER:	
FULL NAME:			
PLEASE NOTE: Emergency contact must be <u>available on race day and not competing.</u>			
If an international number is provided below, please ensure that it has the correct international dial code			
EMERGENCY CONTACT:	NAME:	MOBILE NUMBER:	
HOTEL YOU ARE STAYING IN:	<input type="checkbox"/> Nirwana Gardens <input type="checkbox"/> Bintan Lagoon Resort <input type="checkbox"/> Holiday Villa <input type="checkbox"/> Grand Lagoi Hotel <input type="checkbox"/> Cassia Bintan <input type="checkbox"/> Angsana Bintan <input type="checkbox"/> Others, Please specify: _____	ROOM NUMBER:	
PASSPORT LOCATION DURING THE RACE:	1/ If in hotel room: <input type="checkbox"/> In the safe <input type="checkbox"/> In my luggage <input type="checkbox"/> In a drawer <input type="checkbox"/> Others, please specify: _____	HOW MANY NIGHTS ARE YOU STAYING?	<input type="checkbox"/> 0 (day trip) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 or more
	2/ If at the event venue: <input type="checkbox"/> At bag deposit 3/ If it's with a family/friend: Name: _____ Contact no.: _____	ARE YOU SHARING YOUR ROOM? IF YES, PLEASE SELECT:	<input type="checkbox"/> Another participant <input type="checkbox"/> A non-participating partner/ friend/ family member <input type="checkbox"/> Nobody

ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT
For participation in the Bintan Triathlon 2018 (the "Event")

I understand that participating in the Event is potentially hazardous and carries with it the potential for serious injury or death.

I hereby declare and certify that I am medically able, physically fit and properly trained to enter the Event. I have no medical conditions that I am aware of that would place myself or others at risk or harm as a result of his participation in the Event.

In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the Event, during the Event, or while I am on the premises of the Event.

I also am aware of and assume all risks associated with my participation in this the Event, including but not limited to falls, contact with other participants, and effect of weather, traffic, and conditions of the road. I, for myself and my heirs and executors, hereby waive, release and forever discharge the Event organisers, Tribob.com Pte Ltd, the Union Cycling International, Golazo Sports N. V., the sponsors, promoters, and each of their agents and representatives or officers, successors and assigns, and all other persons associated with the Event, for all my liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in the Event.

I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

I understand that the organisers do not provide medical insurance coverage for participants in the Event and that I am responsible to ensure that I have taken any necessary applicable insurance coverage to take part in this Event.

I consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during the Event and agree to be solely responsible for all costs relating to medical treatment, transportation and/or evacuation.

I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of the Event.

I also hereby certify that I am the actual race entrant and I am not racing under someone else's name.

Signature and date: