

BATTLE IN THE BAY 2024, FRIDAY 29TH NOVEMBER – SUNDAY 1ST DECEMBER DANCER'S AGREEMENT, DISCHARGE, RELEASE, INDEMNITY & WAIVER

Each dancer must complete a separate sheet individually, answering ALL questions and have ID available on the day of competition if

| required for age verificat | 011. | | |
|----------------------------|--------------------------------------|------------|--|
| Full Name: | | | |
| Address: | | | |
| Age: Date | of Birth:/ | | |
| Mobile Phone Numbe | r: Home Phone | e Number: | |
| Email Address: | | | |
| Are you competing me | ore than once: YES / NO | | |
| List Category, Age Div | isions and Crew Name competing with: | | |
| Category: | Age Division: | Crew Name: | |
| Category: | Age Division: | Crew Name: | |
| Category: | Age Division: | Crew Name: | |
| Category: | Age Division: | Crew Name: | |

- 1. In consideration of my entry, I for myself hereby release, discharge and forever hold harmless the organisers of the stated competition with respect to any and all loss arising as a result of any action, claims, which may now or at anytime had, or may have against the organisers with respect to or in any way connected with my participation in the event stated above.
- 2. I agree to abide by the competition rules and criteria stated governing the competition.
- 3. I agree the judges' decision is final.
- 4. I acknowledge the event/competition involves the real risk of serious injury from various causes and do not hold the organisers of said event/competition responsible in any way or form should I be injured while participating in said event/competition.
- 5. I agree to receive and pay for medical treatment, including transport by ambulance which is provided to me at the request or direction of the organisers before, during and after the stated event.
- 6. I recognise the difficulties of participating in the stated competition and attest that I am physically fit to compete safely, have trained and have not been advised by a qualified medical practitioner not to compete in the competition.
- 7. I agree to the use of photograph/s and any media, recording/s for promotional and merchandising purposes without compensation and agree that the organisers own copyright for all material stated.

In consideration of the acceptance of my entry, I the undersigned am legally bound for myself, my heirs, successors, and assigns do hereby waive and release Rezpect, Rezpect Dance Academy, its sponsors, host venues and all persons and agencies connected with this competition from all claims for damages arising from my participation in and travel to and from this competition, including without limitation, personal injury. I certify that I am in good health, physically fit and adequately trained to participate in this event. I grant permission to all the above mentioned to use my name and likeness for any purpose.

I hereby acknowledge that I have read for myself, understand the above rules / criteria / agreement and accept the above conditions.

| Print Name: | | | | |
|---------------------------------|-------|--|--|--|
| Signature: | Date: | | | |
| If under 18 also complete | | | | |
| Print Parent / Guardian's Name: | | | | |
| Signature: | Date: | | | |
| Contact Number: | | | | |

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Official Waiver Form for Battle in the Bay