

**EMOTICONVENTION G.L.P. ACADEMY
ROMAN SPORT CITY
FEBRUARY 22-23-24 2019**

DISCLAIMER

Name and Surname _____

Date and place of birth _____

Resident in (State, City) _____

Address _____

I, who processes this registration form in consideration of and as a condition of acceptance of my entry in the Heroes Convention hereby waive all and any claim, right or cause of action which I otherwise have for or arising out of loss of my life or injury, damage or loss or any description whatsoever which I may suffer or sustain in the course of or consequent upon my entry or participation in - the said event/ program. I will abide by the Sport's rules.

This waiver, release and discharge shall be and operate separately in favour of A.s.d. GLP Academy, Hotel Selene (Piazza di Spagna view S.r.l.) and Roman Sport City S.S.D.A.R.L. and all persons, corporation and bodies involved or otherwise engaged in promotion or staging the event and the servants, agents, representatives and officers of any of them.

I recognise the physical the physical risks associated with this event and declare that I am physically fit to compete safely in this event, and that I have not been advised otherwise by a qualified medical person.

I hereby acknowledge that I have sole responsibility for my personal possessions and athletic equipment during the event and related activities.

I hereby acknowledge that i have sole responsibility for the costs associated with my transportation, in the case of an injury or accident.

I hereby acknowledge that I have disclosed all information requested on the entry form.

Pomezia _____

Signature _____