

## **PARTICIPANT DISCLAIMER JUNIORS (16-20 years)**

1) I understand that my participation involves a degree of risk. However, I confirm that neither the organizer of the race nor the International Skate Cross Federation („ATSX“) nor any of its related companies are to blame in any way if I get injured. I am in possession of a valid personal liability insurance and personal accident insurance that cover my participation. If I cause damage to anyone else or their property, I will take the blame and I will make sure that the organizer, ATSX or any of its related companies will not incur any damage in this regard.

2) I agree to comply with the organizers rules of competition and safety for my own good and everybody else's. I have checked my equipment, which is in good working order, properly maintained and suitable for the race, and I'm aware that I'll only be allowed to take part after a positive on-site inspection and/or safety check. The organizer or ATSX may at any time refuse my participation.

3) ATSX or such third parties as it may authorize from time to time will be entitled to capture and use audio recordings, video recordings and photographs („Material“), from the race and to use my name, image, voice, appearance, performance and biographical material for any purpose (be it commercial, promotional or otherwise) in all media, forever.

4) ATSX or such third parties will be enabled to use, broadcast, screen, display, reproduce and/or make available to the public the material in any and all media, including but not limited to radio, television, cinemas, events, data carriers, and the worldwide web. ATSX will be entitled to make any alterations, intermissions, cuts or other modifications in and out the material and to use such altered material without restrictions. Furthermore, ATSX is allowed to transfer the granted rights to any third party. I know that I won't have the right to approve any of the material. I understand that I might not be named as a participant in the race and do not expect to gain financially from my appearance in any race-related material.

5) I agree that I am not allowed to use my own cameras (e.g. POV, on person or sport equipment mounted) during the race to record moving images and/or a series of still images. ATSX can (but is not obliged) to provide me with a camera ("POV Camera") in order to shoot content for ATSX („POV Camera Content“). I acknowledge and agree that ATSX shall be the sole and exclusive owner of any and all rights in and to the POV Camera Content on a worldwide basis, in perpetuity and in any and all media. ATSX will grant me access to Newsroom footage or private purposes meaning for the use on my own website and my social media channels only. This allowance is valid until cancelled by ATSX and I am not allowed to grant such POV Camera Content to third parties. This does not mean it is not possible for third parties to get access to my POV Camera Content, they just have to request the allowance/rights and the POV Camera Content from ATSX instead of me. For clarification, I am still allowed to shoot moving images and/or still image with my private camera and/or phone while not competing (e.g. at the start of a race, in the athletes area) and I am free to use such content for private purposes.

6) ATSX or third parties, as it may authorize from time to time, will be entitled to collect technical performance data (e.g. speed, airtime, G-forces and positioning data) and use such data as defined above, unless the collection of such technical performance data could affect the sporting result. Personal data (e.g heart rate and similar data) will only be collected and used after my explicit consent.

**Race Location:** \_\_\_\_\_

**Date of Race:** \_\_\_\_\_

### Personal Data Junior Competitor:

Last Name: \_\_\_\_\_

Gender: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Street: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Postal Code/City: \_\_\_\_\_

Email: \_\_\_\_\_

Country: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Personal Data Legal Guardian & Emergency Contact:

Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

First Name: \_\_\_\_\_

Street: \_\_\_\_\_

Email: \_\_\_\_\_

Postal Code/City: \_\_\_\_\_

Country: \_\_\_\_\_

Signature: \_\_\_\_\_