



HINDU COUNCIL OF KENYA KISUMU BRANCH



PRESENTS TELEMANIA WITH KITE MELA ON 14th & 15th JANUARY-2017

ENTRY FORM

- * **NAME:** _____
- * **AGE:** _____
- * **GENDER:** _____
- * **PHONE NUMBER(WHATSAPP):** _____
- * **ENTERY FEE KSH: 200/-**
- * **ENTRY DEADLINE: 8-1-2017**
- * Rules, Regulation and guide line will be given to you by team captain prior to even.
- * Please read following Disclaimer and sign underneath.

EVENT DISCLAIMER

By participating in the TELEMANIA with KITE MELA on Saturday & Sunday 14/15 January 2017 (the Event), I confirm and agree to the following:

- 1. Fitness:** - I am physically fit and able to participate in the sporting activities to take place during the Event and I accept all risks resulting from my participation in these activities.
- 2. Medical attention:** - In the event that I need medical attention during the Event I agree to be treated by a qualified emergency first aid coach.
- 3. Behavior:** - I will conduct myself in an appropriate manner at all times during the Event and will not act improperly, violently or impolitely towards any other person or property.
- 4. Confidentiality** :-I will keep confidential all aspects of Hindu Council of Kenya Kisumu Branch (including information about Event personnel and players) that I learn during the Event, whether such information has been learned incidentally, intentionally or otherwise.
- 5. Use of images** :-I hereby grant to Hindu Council of Kenya Kisumu Branch the right, without approval or compensation, to use my image in any of the photographs taken on behalf of HCK KISUMU at the Event for any purpose in any part of the world.
- 6. Injuries:** - I accept that, Hindu Council of Kenya Kisumu is not liable for any injury caused to me during the event.
- 7. Valuables:** -Hindu Council of Kenya Kisumu branch is not liable for loss or damage to my property that occurs during the Event and I bring any valuables to the Event entirely at my own risk.
- 8. Minor** :- Parent to give consent to children of under age(Below 18years) and take full indemnity by signing underneath.

NAME OF PARTICIPANT: - _____ **SIGN:** - _____ **DATE:** _____

IN CASE OF MINOR

NAME OF PARENT : _____ **SIGN:-** _____ **DATE:-** _____