Irish Amateur Wrestling Association Waiver and Release Form

WARNING: THIS IS A LEGAL DOCUMENT. PLEASE READ CAREFULLY BEFORE SIGNING.

This is a two-page document

Waiver and Release Form for Trial / Taster Session non IAWA members

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This document affects your le	gal rights and obligations.
1. Acknowledgement of Risk	(participant's full name in block capitals), acknowledge and estling, grappling, and related contact sports organised or sanctioned by the Vrestling Association (IAWA) involve inherent risks, including but not limited to permanent disability, or death.
Irish Amateur Wrestling Assoc	ling, and related contact sports organised or sanctioned by the ciation (IAWA) involve inherent risks, including but not limited to
2. Voluntary Participation	
-	choosing to participate in training, competitions, trial/taster onducted under the auspices of the IAWA or any affiliated club.

3. Waiver and Release of Liability

To the fullest extent permitted by Irish law, I hereby waive, release, discharge, and hold harmless the IAWA, its officers, directors, affiliated clubs, coaches, members, officials, and volunteers ("the Releasees") from any and all claims, demands, actions, or causes of action, whether in negligence or otherwise, arising from my participation in IAWA activities, including any injury, loss, or damage sustained, however caused.

4. Medical Fitness

I confirm that I am medically fit to participate. I declare that I have **no known medical condition** that would make participation unsafe. I undertake to immediately notify the Club of any change in my health status.

5. Insurance

I understand and agree that:

- I am not covered by the IAWA personal accident insurance policy unless I become a registered IAWA member and elect to purchase such cover.
- As a trial/taster participant, I am not insured under IAWA personal accident cover and I participate entirely at my own risk.

This form must be completed **before participation** in any IAWA-affiliated trial/taster session or event.

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6. Governing Law

This Waiver and Release shall be governed by and construed in accordance with the **laws of Ireland**. Any dispute shall be subject to the exclusive jurisdiction of the Irish courts.

Partic	ipant Declaration	
	read and understood this Waiver and Release Form. I fully accept the risks involved and to be bound by its terms.	
•	Club Name:	
•	Participant Name:	
•	Date of Birth:	
•	Address:	
•	Emergency Contact (Name & Number):	
•	Participants Signature: Date:	
I, the u	t/Guardian Consent (for participants under 18) Indersigned parent/guardian, consent to the participation of the above-named minor in activities. I have read and understood this Waiver and Release Form and agree to its terms half of the minor.	
•	Parent/Guardian Name:	
•	Signature:	
•	Date:	
	Admin Name & Signature	

This form must be completed **before participation** in any IAWA-affiliated trial/taster session or event.