

2025 Max Asia Youth Bouldering Championship Participant Consent Form

Participant's Name:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth(yyyymmdd):	Passport Number :

* This registration information is used solely for identity verification, event communication, and insurance purposes for this competition.

Participation Agreement:

I, _____, voluntarily agree to participate in the “2025 Max Asia Youth Bouldering Championship” and have thoroughly read and fully understood the following:

Bouldering competitions inherently involve potential risks. Participants must comply with competition rules, follow the instructions of event staff, and always pay attention to their own safety as well as the safety of others. In the event of any accident caused by personal negligence, the participant shall bear full responsibility, and the organizers and staff shall not be held liable.

Participants are responsible for arranging their own transportation, accommodation, and meals. The venue will be covered by public liability insurance arranged by the organizing unit, with the following coverage: NT\$3,000,000 per person for bodily injury, NT\$15,000,000 per accident for bodily injury, NT\$2,000,000 per accident for property damage, with a maximum liability limit of NT\$34,000,000 during the insured period.

Participants must handle their own insurance for travel to and from the event. It is recommended that all participants arrange personal accident insurance according to their individual needs. Event staff will be covered under insurance provided by the organizers.

I agree that any photos taken during the event will be jointly owned by both the organizers and the individuals involved. Both parties may use the images legally and independently.

I confirm that all information provided is true and accurate. Any false information will result in automatic disqualification from the competition and forfeiture of any awards received, which must be returned. I, along with my legal guardian (if applicable), will take full responsibility.

Participant's Signature: _____

Parent/Guardian Signature (if underage participants): _____

Parent/Guardian Passport Number: _____

Date: _____