## STATEMENT

(sign with your own hand)

(Full Name) hereby confirm that I'm in good physical shape and passed medical examinat	ion and have no any
contraindications to participation in the races hold under "Tour of World Clas	s 2017".
30k 52l	k
(underline as applicable)	
I am aware of all risks related to this event and understand that the race	requires strong athletic
background.	
I understand that the adverse effects can affect my health because of my	y participation. I'm solely
held responsible for personal security and health. In case of an accident dur	ring the marathon, getting
injured or getting of physical harm, I voluntarily and knowingly abandon and	y material or other claims
and demands to organizers of "Tour of World Class 2017". This abandonmer	nt of the claims extends to
my presumptive heirs and guardians.	
I hereby confirm that I had been familiarized with Rules and Regulat	ions of the race and I am
aware that I will be disqualified in case of violation.	
I have read and understood this document.	
"" August 2017 Signature	