



## DISCLAIMER OF LIABILITY | conditions of participation.

To make sure that your surf session on the CityWave will be unforgettable for you, we kindly ask you to fill out and sign the conditions of participation:

name: \_\_\_\_\_ surname: \_\_\_\_\_

address: \_\_\_\_\_

zipcode, country, state: \_\_\_\_\_

e-mail: \_\_\_\_\_

session date/time: \_\_\_\_/\_\_\_\_/\_\_\_\_ surf experience:  beginner  advanced  pro

I weigh more than 120 kilos.  yes  no

I have problems with my shoulders / hinges  yes  no

I have problems with my back / intervertebral discs / backbone  yes  no

If so, which: \_\_\_\_\_

I have a cardiovascular disease  yes  no

If so, which: \_\_\_\_\_

I have a pacemaker  yes  no

I had an apoplectic fit  yes  no

I am under influence of alcohol / drugs  yes  no

I have an acute injury  yes  no

I am acutely ill  yes  no

If so, which injury / illness: \_\_\_\_\_

I have a brain / vestibular system / nervous system disorder.

Other physical symptoms that CityWave (AWSM\_GmbH) should know before

performing my surfing session: \_\_\_\_\_

I am younger than 8 years  yes  no

*female surfers:* I am pregnant.  yes  no

**I am aware of the currently applicable COVID-19 guidelines on the CityWave facility and will always maintain the correct safety distance to other surfers. I understand that surfing the CityWave is a sporting activity and my participation carries a risk of injury. I would like to surf and take part in the booked session at my own risk. Non-swimmers are not allowed to use the facility!** By using the system, you implicitly agree to the free recording (no compensation will be paid) of photos, live images and videos and the operator receives the free and unlimited usage rights for all photos and videos taken on the platform.

Wr. Neudorf, (date) \_\_\_\_/\_\_\_\_/\_\_\_\_

signature \_\_\_\_\_  
(signature of parent or legal guardian if minor)