



LIABILITY WAIVER FORM

I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official, including those relative to my ability to safely complete the run.

I hereby certify that I am in good health and I have trained to run the distance of the race, which I am entering on a non-competitive basis, and that I will conduct myself in a safe and prudent manner while participating in the event.

I assume all risks of any injury, harm, loss, cost, inconvenience or other damage that may result from or be connected in any way to the run including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me.

Having carefully read and understood this waiver and knowing these facts, I, for myself and anyone entitled to act on my behalf, waive and release ASD Leaning Tower Runners, their officers, directors, agents, volunteers and employees, all states, cities, counties, the Municipality of Pisa or other governmental bodies or locations in which events or segments of events are held, all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of or in connection with my participation in this event even though that liability may arise out of negligence, carelessness, error or faults on the part of the persons named in this waiver.

I understand and agree that my participation in the event and any related activities shall be governed by and construed in accordance with the laws of Italy and that any disputes arising out of or in connection with the race shall be referred to the exclusive jurisdiction of the courts of Pisa, Italy.

Athlete Name: _____

Bib number: _____
or registration ID

Date: ____ / ____ / ____
dd/mm/yyyy

Athlete Signature: _____

Parent Signature: _____
if under 18 only

Please duly fill in this Liability Waiver Form and send it to iscrizioni@pisahalfmarathon.com together with a valid ID document copy.