



**iARNIS WORLD ENCOUNTER 2017**  
July 23-29, 2017

SUBMIT 2 COPIES  
OF LATEST  
1X1 PICTURE

**INDIVIDUAL TOURNAMENT ENTRY FORM**

Date : \_\_\_\_\_  
 Name of Club / Team : \_\_\_\_\_  
 Country : \_\_\_\_\_

**EVENTS:**

**Full Contact** : \_\_\_\_\_  
 (Please indicate Weight Division)

**Anyo** :

Division	Individual	Team	Signatures
(Check as many as necessary)			
Single Weapon			
Double Identical Weapon			
Sword and Dagger			

**Name:** \_\_\_\_\_  
*Last Name      Given Name      Middle Name      ID Number*

**Age:** \_\_\_\_\_ **Birthday (mm/dd/yyyy):** \_\_\_\_\_ **Citizenship:** \_\_\_\_\_

**Height:** \_\_\_\_\_ **Weight (kg):** \_\_\_\_\_ **Passport # /Place Issued:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Contact No.** \_\_\_\_\_

I hereby certify that the above information are true and correct, and that I shall abide with all the rules and regulations of Arnis Pederasyong Internasyonal, Inc. (i-ARNIS).

**ADVISEMENT AND WAIVER**

Please be advised that this event is sanctioned by Arnis Pederasyong Internasyonal, Inc. (i-ARNIS), the official and recognized International Federation for Arnis by the International Olympic Committee (IOC) and Philippine Olympic Committee (POC).

In consideration of my participation in the iArnis World Encounter 2017 at \_\_\_\_\_

I agree to assume all risks incidental to such participation (which may include among other things muscle injury and broken bones). On my own heirs, executors, administrators and next of kin, I hereby release, covenant not to sue, and forever discharge the Release Parties (as defined below) of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way my participation in the Event and/or any such activities, and further agree to indemnify and hold harmless each of the Released Parties from and against any and all such liabilities, claims, actions, damages, costs or expenses including but not limited to, all attorney's fees and disbursements up through and including any appeal.

I understand that this Release and indemnity includes any claims based on accidents and/or negligence, suffered by me during or after such participation. I declare that I am physically fit and have the skill level I required to participate in the Event and/or any such activities.

I further authorize medical treatments for me at my cost, if the need arises. For the purposes hereof, the "Released Parties are ARNIS PEDERASYONG INTERNASYONAL, INC. (i-ARNIS), ARNIS PHILIPPINES, INC. (ARPI), PHILIPPINE OLYMPIC COMMITTEE (POC) and the PHILIPPINES SPORTS COMMISSIONS (PSC) and it's Principals, Officials and Agents and it's Regional Sports Organizations and Affiliates.

Participant's Signature over printed name \_\_\_\_\_

Coach's signature over printed name \_\_\_\_\_

**Approved by:** \_\_\_\_\_  
 Secretariat's signature over printed name / OR#

**Received by:** \_\_\_\_\_  
 Screening Committee's signature over printed