

LIABILITY WAIVER

I, _____, born on __/__/__, holder of identification document n.º _____, valid until __/__/__, declare that I have no physical or psychological impediment to my participation in the ALUT - ALGARVIANA ULTRA TRAIL event, which will take place from November 28th to December 1st of 2024, and that I am fully aware of the regulations and information provided. I acknowledge that my participation is entirely and exclusively my own responsibility, and I cannot hold the organization responsible for any criminal or civil liability for physical, moral, or material damages that may occur during the activity, in which I am directly or indirectly involved, and which exceed the coverage of the insurance provided.

Date:

(Signature)

This liability waiver is necessary for participation in the 2024 edition of the ALUT- Algarviana Ultra Trail event. Without it, along with a medical certificate, the bib will not be delivered.