



Acknowledgments, Releases and Indemnities

This is an important document that affects your legal rights and obligations. You must read it carefully before entering the event. During online entry you must check the box to confirm you have read and understand this form. All participants must sign this form and email it to the organiser.

In consideration of Hijo Outdoor & Sports Events Management ("Event Organizer" or "Projek Hijo") accepting my participation in the Trail des Gombak which will be held starting at the Dewan Serbaguna JAKOA Bt 12, Gombak on 20-22 June 2025 ("Event"), I agree to this release of claims, waiver of liability and assumption of risk.

1. I have read and understood the relevant competitor briefing documents and information relating to the Event.
2. The Event Organizer may, at their absolute discretion, refuse entry or cancel entry (with a full or half refund, as per terms) to any person for any reason whatsoever.
3. I understand the demanding physical nature of the Event. I declare, as a condition of entry to the event, that I have trained adequately for the Event and that I am not aware of any illness, injury or any other physical disability that could cause me injury or death while participating in the Event.
4. If I become aware of any medical condition or disability, or otherwise become ill or injured before or during the Event, I will withdraw from the Event.
5. I acknowledge that participating in the Event is a dangerous activity and that through such participation I am exposed to certain risks. I acknowledge that the enjoyment of trail running is derived in part from the risks and efforts that exist outside the safety of life accepted at home or at work and that these inherent risks contribute to that enjoyment and are the reason for my participation in the Event.
6. I acknowledge and understand that while participating in the Event:
 - I may be injured, physically or mentally, or may die due to various causes including, but not limited to overexertion, dehydration, heart attack, slipping, tripping or falling, accidents with other participants, spectators and road users, or accidents caused by my own actions;
 - My personal property may be lost or damaged;
 - I may cause injury to others or damage their property;
 - The conditions under which the Event is conducted may vary without warning;
 - I may be in a remote location or deep into the forest where access to medical support may be limited and it may take a long time to reach me;
 - There may be no or insufficient facilities for my treatment or transportation if I am injured;
 - I assume the risk and responsibility for any injury, death or property damage resulting from my participation in the Event

7. I agree that if I am injured or require medical assistance, the Event Organizer may, at my cost, arrange for medical treatment and emergency evacuation that the Event Organizer deems necessary. I agree that I am responsible for my own medical and ambulance insurance coverage.

8. I agree to release, indemnify and hold harmless the Event Organizer, its officers, employees, agents, volunteers, contractors, public bodies, landowners and sponsors, from and against any and all claims, demands, rights or causes of action, suits, expenses, costs and proceedings of any kind whatsoever which may be made by me or on my behalf or by any other party for or in connection with or arising out of any injury, loss, damage or death caused to me or my property as a result thereof my participation or participation in the Event whether through negligence, breach of contract or otherwise.

9. I also agree that if I am injured or my property is damaged, I will not bring any claim, legal or otherwise, against the Event Organizer in respect of such injury or damage.

10. I understand that my medical history and personal information, collected as part of the entry process for the Event will be made available to the event's medical team and operations team. It will only be used to help staff look after me if I need help and care. If I am transferred from the event by the Emergency Services, this personal information as well as any new data entered by the event staff will be supplied to the Emergency Services staff to enable my continued care.

11. I agree to allow my name, results, photographs, videos, multimedia or film likeness to be used for any lawful purpose by Event Organizers, sponsors, event partners, or assigns without payment or compensation.

12. I acknowledge that my image may be taken by the Event photographer and that the Event photographer may contact me to offer for sale my image at the Event.

13. I agree to abide by the rules of the Event and the instructions of all Event officials.

14. I acknowledge that the Event Organizer may change the advertised route and distance without notice if the Event Organizer deems this necessary. I also acknowledge that the Event Organizer may cancel the Event due to weather conditions, security considerations, terrorism or 'Force Majeure' and in such circumstances my entry fee will not be refunded.

First Name: _____

Last Name: _____

Signature: _____

Date: _____

Thank you for your co-operation.