

# LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT

## 2027 AIDA FREEDIVING COMPETITION

**Organizer:** Ocean Tigers Freediving

**Location:** Cabo San Lucas, Baja California Sur, Mexico

**Competition:** Horizontal Blue 2027

**Competition Dates:** APRIL 29—MAY 2

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## ATHLETE INFORMATION

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Nationality:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone / WhatsApp:** \_\_\_\_\_

**AIDA ID:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

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## 1. ATHLETE DECLARATION

I, \_\_\_\_\_, voluntarily choose to participate as an athlete in the above-mentioned 2027 AIDA freediving competition.

I declare that, to the best of my knowledge, I am physically and mentally fit to participate in competitive freediving and capable of performing the disciplines for which I register.

I understand that it is my responsibility to comply with the medical requirements established by the applicable AIDA Competition Rules and by the competition organizer.

I agree to immediately inform the organizer, jury or safety team of any significant change in my physical or medical condition that could affect my ability to compete safely.

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## 2. ACKNOWLEDGMENT OF FREEDIVING RISKS

I understand and acknowledge that freediving is an inherently demanding activity involving significant risks.

These risks include, but are not limited to:

- Hypoxia and loss of motor control (LMC);
- Blackout and loss of consciousness;
- Drowning;
- Lung, ear, sinus and other pressure-related barotrauma;
- Pulmonary complications;
- Injury during warm-up or competition performances;
- Collision with the pool wall, bottom, lane equipment or other objects;
- Injury during rescue or recovery procedures;
- Cardiovascular or respiratory complications;
- Other injuries, permanent disability or death associated with breath-hold diving and competitive freediving.

I understand that these risks cannot be completely eliminated even when appropriate competition rules, supervision and safety procedures are followed.

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## 3. AIDA COMPETITION RULES

I confirm that I am responsible for knowing and complying with the **AIDA International Competition Rules applicable at the time of the competition**.

I agree to follow all instructions issued by:

- The AIDA Jury;
- The Main Judge and other authorized judges;
- The Competition Organizer;
- The Head of Safety and safety team;
- Medical and emergency personnel;
- Authorized pool or venue personnel.

I understand that failure to comply with competition or safety instructions may result in a penalty, disqualification or exclusion from further participation when permitted by the applicable AIDA rules.

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## 4. SAFETY INTERVENTION

I expressly acknowledge and accept that AIDA safety personnel may intervene whenever they consider intervention necessary for my safety.

I authorize trained safety personnel to perform appropriate rescue procedures in the event of loss of motor control, blackout, loss of consciousness or any other emergency.

Where reasonably necessary in an emergency, I authorize the provision of:

- Rescue breathing and airway management;
- Oxygen first aid;
- CPR;
- AED use;
- First aid;
- Emergency medical assistance;
- Ambulance or emergency transportation;
- Other reasonable emergency procedures considered necessary to protect my life or health.

I understand that a safety intervention may result in termination of my performance and may affect my competition result according to the applicable AIDA Competition Rules.

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## 5. VOLUNTARY PARTICIPATION AND ASSUMPTION OF RISK

My participation in this competition is entirely voluntary.

I understand the nature of competitive freediving and knowingly accept the inherent risks associated with my participation, including risks that may result in serious injury, permanent disability or death.

I understand that I remain responsible for deciding whether I am physically and mentally capable of starting each individual performance.

I may withdraw from a performance or from the competition whenever I believe that continuing would place my health or safety at risk.

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## 6. RELEASE OF LIABILITY

To the fullest extent permitted by applicable law, I release and hold harmless **Ocean Tigers Freediving**, the competition organizer, its directors, employees, volunteers, AIDA judges, safety personnel, medical personnel and other persons officially involved in the organization of the competition from claims arising solely from the inherent and voluntarily assumed risks of my participation.

This release does **not** apply to liability that cannot legally be excluded or limited under applicable Mexican law, including where applicable liability resulting from gross negligence, intentional misconduct or other conduct for which liability cannot lawfully be waived.

Nothing in this agreement is intended to waive any right that cannot legally be waived.

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## **7. PERSONAL RESPONSIBILITY**

I understand that I am responsible for:

- Providing accurate information during registration;
- Maintaining any AIDA membership required for participation;
- Providing the medical documentation required under the applicable AIDA Competition Rules;
- Respecting my own physical and psychological limits;
- Following the competition schedule and Official Top procedures;
- Following all safety instructions;
- Immediately reporting any injury, illness or unusual symptoms experienced before, during or after a performance.

I agree not to participate while under the influence of alcohol, recreational drugs or any substance that could materially impair my ability to compete safely.

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## **8. EMERGENCY MEDICAL EXPENSES**

I understand that emergency medical treatment, ambulance transportation, hospitalization, hyperbaric treatment or other medical services may result in expenses.

Except where responsibility is imposed on another party by applicable law or where expenses are covered by applicable insurance, I understand that I remain responsible for my personal medical expenses.

I am strongly encouraged to maintain appropriate medical and/or travel insurance covering competitive freediving activities.

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## **9. ACKNOWLEDGMENT**

By signing below, I confirm that:

- I have read this agreement in full;
- I understand its contents;
- I understand the risks associated with competitive freediving;
- I have had the opportunity to ask questions before signing;
- The information I have provided is accurate;

- I understand that signing this document is a condition of participation established by the organizer;
- I voluntarily accept the risks described above.

I understand that this agreement is intended to have legal consequences.

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## **ATHLETE**

**Full Name:**

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**Signature:**

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**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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## **IF ATHLETE IS A MINOR**

I declare that I am the parent or legal guardian of the athlete named above and that I have read and understood this agreement.

**Parent / Legal Guardian Full Name:**

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**Relationship to Athlete:**

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**Signature:**

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**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_