





## CONSENT AND RELEASE:

I, the undersigned/parent/guardian of \_\_\_\_\_, hereby acknowledge and agree to the following:

1. I am aware that participation in the Malta OCR 100 involves certain risks, including but not limited to physical exertion, exposure to outdoor elements and the possibility of injury.
2. I certify that my child is physically fit and healthy to participate in this event. I have consulted with a medical professional if necessary, and my child has been deemed fit to take part.
3. In the event of any medical emergency or injury during the race, I authorise the event organisers and their designated personnel to administer necessary first aid, seek medical treatment, and make decisions regarding emergency medical care as they deemed appropriate.
4. I understand that the event organisations, including the organisers and sponsors, will not be held responsible or liable for any injuries, accidents, losses, or damages that may occur during the Young Hustlers Race.
5. I release and discharge the event organisers, their officers, employees, and volunteers from any and all claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including but not limited to personal injury or property damage, incurred by the participant during their involvement in the Young Hustlers Race.
6. I consent to the use of photographs, videos, or other media taken during the event, which may feature my child, for promotional purposes by the event organisers.

I have read and understood this Medical Consent Form, and I voluntarily agree to its terms and conditions.

Date: \_\_\_\_\_ Athlete (or guardian) Signature: \_\_\_\_\_