



# 17TH WORLD BODYBUILDING & PHYSIQUE SPORTS CHAMPIONSHIPS 2026

3RD TO 9TH DECEMBER 2026, DONCHAN PALACE HOTEL, VIENTIANE, LAO PEOPLE'S DEMOCRATIC REPUBLIC

Organised by

**LAO BODYBUILDING FEDERATION**

Under the Umbrella of The

**WORLD BODYBUILDING AND PHYSIQUE SPORTS FEDERATION**

Recognised by

**MINISTRY OF EDUCATION AND SPORTS, NATIONAL OLYMPIC COMMITTEE OF LAO**

## WAIVER OF LIABILITY FORM

(PLEASE READ THIS FORM CAREFULLY)

1. I understand that for me to participate as a competitor in the 17th WBPF World Bodybuilding & Physique Sports Championship, 2026 Championship, I must agree to be bound by this Waiver of Liability and that I do so willingly and of my own free will.
2. I agree to waive any and all claims I may now and in the future have against, and release from all liability and agree not to sue the World Bodybuilding and Physique Sports Federation WBPF, LBBF and the Organizing Committee of the 17th WBPF World Bodybuilding & Physique Sports Championship, 2026, the WBPF Competition officials, volunteers, agents or representatives, the official hotel and official competition venue and their staff, hereinafter referred to as the "Released Parties", for any personal injury, death and property damages, expenses or loss sustained by me as a result of my participation in the Event due to any cause whatsoever, including, without limitation, negligence or breach of statutory duty on the part of the Released Parties.
3. I agree that medical and personal injury insurance coverage while participating in the 17th WBPF World Bodybuilding & Physique Sports Championship, 2026 is solely my responsibility and that I agree to be responsible for and to pay for any and all costs that may arise as a result of my requiring medical and/or other special services and, in any event, should the Released Parties incur any cost for any such services for me personally.
4. I agree to reimburse the Released Parties for all costs of these services as may be incurred by them for my benefit or at my request.
5. In entering into this agreement, I am not relying on any oral, written or visual representations or statements made by the Released Parties to induce me to participate in this Event.
6. I confirm that I am the full age of majority and that I have read and understood this agreement prior to signing it and agree that this agreement will be binding upon me, my heirs, next of kin, executors, administrators and successors.





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NAME OF THE ATHLETE:	
DATE OF BIRTH:	
AFFILIATED NATIONAL FEDERATION:	
ADDRESS:	
E-MAIL ID:	
MOBILE NO:	

\_\_\_\_\_  
SIGNATURE OF ATHLETE

\_\_\_\_\_  
SIGNATURE OF TEAM MANAGER/ COACH

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLACE

**THIS FORM MUST BE SIGNED BY THE ATHLETE AND PRESENTED TO THE WBPf BEFORE THE COMPLETION OF THE WEIGH-IN AND REGISTRATION, FAILING WHICH THE ATHLETE WILL NOT BE ALLOWED TO COMPETE.**

