



Ultra Trail New Caledonia 2018

May 18, 19 & 20

The certificate is in accordance with New Caledonia law. However, in order to make sure that we treat all the certificates sent from different countries correctly, it is compulsory to use this form, no other will be accepted. This medical certificate has to be filled in, dated and signed by the doctor, who stamps it and specifies his professional number. This certificate must be sent to the organizer by 14 May 2018. Failure to do by this date will lead to the annulment of registration without reimbursement. Nobody will attend the race without the medical certificate.

MEDICAL CERTIFICATE

To be filled by You, the participant:

First name(s) Surname:
Date of birth: ___ / ___ / _____,
Address:
Town: Country: Contact number:
Emergency contact name: Emergency contact number:

To be filled by your GP / Doctor / Medical Practitioner

I, the undersigned doctor of medicine
certify that the careful medical examination of above participant does not reveal any contraindication to the practice of competitive ultra-trail running including UTNC 2018. And that the above participant is aware of the listed medical recommendations attached.

Professional stamp/seal:

Professional number:.....

Date: ___ / ___ / _____

Signature of doctor:

ACCIDENT WAIVER and RELEASE LIABILITY

I fully realise the dangers of participating in this endurance event which traverses difficult and hazardous terrain and which may expose me to dangerous conditions. I have been warned that I should not participate in the event unless I am in excellent physical condition and have considerable trail running experience. I understand I may be exposed to various risks involving an event of this type, including, but not limited to injuries or death from foreseeable and unforeseeable factors which may include dehydration, extreme temperatures (5° to 35°C), high humidity, electrical storms, falls, animal encounters, hazards from vehicles, getting lost or being injured at a remote location where medical attention cannot be timely provided. I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, lack of hydration, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, journalists, coaches, event officials, and event monitors, and/or producers of the event. The risks are not only inherent to athletics, but are also present for volunteers and support staff. I hereby assume all of the risks of participating in this event. I have read the listed medical recommendations attached. I certify that I am physically fit, have sufficiently trained and prepared for participation in the event and have been warned by the medical practitioner signing above medical certificate after providing him/her all medical information related to my condition. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that all medical and/or emergency evacuation costs for participants or crews will be borne by that person or their heirs. The race organisers and sponsors are in no way liable or responsible for medical costs or emergency evacuation. In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Daniel Bonnefis, Union des Trailers de Nouvelle Calédonie, their members, administrators, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers, as well as any and all involved municipalities or other public entities, (and their respective agents and employees); (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event. I understand that at this event or related activities, I may be photographed, filmed, and/or videotaped. I agree to allow my name, photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organisers and assigns. I have read, understand, and agree to abide by the rules of the event. I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors, and organisers, in which I may participate and that it will govern my actions and responsibilities at said events. I understand that this AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document; and, I understand its content. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Name of the participant (As it appear in Passport): Date : ___ / ___ / _____

Signature:



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MEDICAL RECOMMENDATIONS

Those « 10 Golden Rules » are the base of sport best practice

1/ TRAINING: Be prepared and train several months on advance with long mountain training. Warm-up before exercise, dynamic stretching during and static stretching after exercise.

2/ HYDRATATION: Drink enough before, during and after exercise, even before getting thirsty. At least every 15 minutes about 1L per hour of intense exercise.

3/ FOOD: Always carry food / energy supply. Eat before being hungry.

4/ INJURY: Do not start the race if suffering from muscular, bone, tendons or ligament injury which would increase while running.

5/ DEASES: Do not start the race if suffering from fever or 8 days following flue symptom.

6/ DRUGS: Unwanted effect of some drug could be increased with physical exercise and could lead to unwanted complication or failure (kidney of muscular). Always take advise from your GP / Doctor.

7/ DOPING: The usage of doping products is forbidden and is liable to penalties. The listing of illegal drugs is available on www.afld.fr. Any listed drugs required a Therapeutic Use Exemption (TUG).

8/ SMOKING: Tobacco smoking is harmful. It is especially dangerous to smoke 1 hour before and up to 2 hours after sport exercise.

9/ SYMPTOMA during EXERCISE: Any chest pain, palpitations, shortness of breath, sickness during sport exercise need to be reported to your GP / Doctor.

10/ SYMPTOMA after EXERCISE: very dark or very little urine, blood in the stool and oedema need to be reported to a GP / Doctor before taking your flight.

Do not hesitate to take advise with your physiologist, podiatric or nutritionist. Read documentation on Ultra Trail training and preparation.