

# 2024日本静冈县马拉松个人报名表

## 2024 Shizuoka Individual Marathon individual registration form

名 First Name (例Example:ZHANG)	
姓 Family Name (例Example:SAN)	
中文姓名 Full Name (例Example:张三)	
日文姓名 Japanese Name (例Example:張三)	
参加项目 Discipline	
国籍 Nationality	
护照号 Passport Number	
身份证 Identification card	
出生日期 Date of Birth (例Example:1990-08-08)	
性别 Gender	
手机 Mobile	
电话 Telephone	
电子邮件 E-mail	
通讯地址 Address	
国家 Country	
城市 City	
省/自治区 Province/Town	
邮政编码 Post Code	
学历 Education	
职业 Occupation	
应急联系人姓名 Emergency Contact Name	
应急联系人手机 Emergency Contact Phone	

### 参赛选手声明 Runners' Declaration:

- 谨此声明本人自愿参加2024年日本静冈县马拉松赛及一切相关活动。  
I confirm that I am entering the 2024 Shizuoka International Marathon at my own choice.
- 本人身心健康, 适合参加此次马拉松赛事并己为参赛做好充分准备。本人充分了解参加马拉松比赛可能出现的风险, 且己准备好必要的防范措施。  
I certify that I am physically and mentally capable of participating in the Marathon race. I understand that by participating in the Marathon there might be possible risks and I have already taken proper measures against them.
- 本人同意对于非组委会原因造成的伤害、死亡或其它任何形式的损失无权索求任何形式的赔偿。  
I am entering this event at my own risk and responsibility. I hereby discharge the organizer and any other individuals or organizations connected directly or indirectly with this event from any responsibility in the event of injury, death or loss of property of any kind.
- 本人同意按照有关要求接受药物检查以及组办方在比赛期间提供的医疗救治。  
I agree to take a doping test and receive any necessary medical treatment provided by the organizer.
- 本人授权组委会方及其指定媒体无偿使用本人的肖像、姓名、声音和其它个人资料用于赛事的组织和推广之用。  
I grant permission and assign all rights, title and interest to the organizer to utilize my personal information, appearance, name, voice, bio-data and likeness with the Event in any and all Event organization and promotion activities.
- 本人承诺以个人名义报名并参加比赛, 决 not 将报名后获得的号码布以任何方式转让他人。  
I confirm to enter the Event in my own name and will not transfer my number bib to others for any purpose.
- 本人同意向组办方提供有效身份证件和资料用于核实本人的身份, 并同意承担因身份证件和资料不实所产生的全部责任。  
I understand and agree to provide correct and valid ID/passport to verify my personal details to the organizers and agree to take full responsibility of any consequences resulted from incorrect or invalid personal details.
- 本人同意并接受大会免费提供的2024日本静冈县马拉松意外伤亡保险。  
I agree and accept the free insurance provided by the organizer of Shizuoka International Marathon.
- 本人完全理解并同意遵守组委会及协办机构所制定的各项规定及采取的各项措施。因不遵守组委会的相关规定而造成的任何伤害, 死亡和损失将由本人全权负责。  
I fully understand and agree to obey rules & regulations and measures of the Committee. I myself will take all of the responsibility of any injury, death, and lose caused by disobey of rules & regulations of the Committee.
- 本人或法定代理人己认真阅读并全面理解以上内容, 且对上述所有内容予以确认, 并承担相应的法律责任。  
By signing this Entry Form, I and my legal adviser have already read and confirm to accept all the above terms, conditions and points and will take full responsibility.

签名Signature:

日期Date: