

Darwin Bushwalking Club

PO Box 41568, Casuarina, NT 0811

Walk.....Leader.....Date.....

ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS:

I am aware that my voluntary participation may expose me to the risk of injury, illness, death or to loss or damage to my property.

To minimize these risks I have endeavoured to ensure that:

- The activity is within my capabilities and I am carrying appropriate food, water and equipment.
- I have advised the group leader if I am taking any medication or have any physical or other limitation that might affect my participation.
- I will make every effort to remain with the group and accept the leader's instructions.
- I have read and understand these requirements and accept all associated risks.

In signing this form I hereby waive my rights to sue the leader, the Club and other participants. I agree that any contract arising from my participation will exclude any liability arising from the supply of goods and services by the Club or walk leader.

I am aware that group members may take photos and upload them to social media or photo-sharing sites – and any concern about this needs to be discussed with the group in advance.

Participant	Home Telephone	Emergency Contact	Contact's phone number	Signature

Please return completed form to a Committee member (or to the above postal address).