



# AGNES WATER PHARMACY JUNIOR AQUATHLON ENTRY FORM 2019

First Name	Surname	DOB:
Address		
Phone		
Mobile	Email	

<b>CATEGORY</b>	Male	U10	<input type="checkbox"/>	Male	U14	<input type="checkbox"/>
	Female	U10	<input type="checkbox"/>	Female	U14	<input type="checkbox"/>
	Team	U10	<input type="checkbox"/>	Team	U14	<input type="checkbox"/>

**ENTRY FEE \$10**

Date Paid:

**WARNING: This is a legal document that affects your rights.**

- I acknowledge that competitive multisport involves the real risk of serious injury or even death from various causes including overexertion, equipment failure, dehydration, and accidents with other competitors, spectators or road users, course or weather conditions and other causes.
- I understand that I should not compete in this event unless I have trained appropriately and a medical practitioner has verified my physical condition.
- By competing, I accept all risks necessarily following from my participation that could result in loss of life or permanent injury. Accordingly, I release all persons or corporations associated directly or indirectly with the conduct of the event from all claims demands and proceedings arising out of my participation and I hereby indemnify them against all liability (including liability for their negligence and the negligence of others) for oil injury, loss or damage arising out of or connected with my participation in this event. This release shall extend to and include the Agnes Water Triathlon Inc Organisers and Volunteers, Triathlon Australia Inc., Triathlon Queensland Inc, and their respective directors, partners, managers, officers, agents, contractors, employees and volunteers including medical and paramedical personnel appointed for the event, the owners, licensees and occupiers of land upon which the event or any part of it is conducted, any statutory body or local authority having control over land upon which the event or any part of it is conducted or which is involved directly or indirectly with the event in any manner whatsoever and promoters, sponsors and event organisers. This release and indemnity continues forever and binds my heirs, executors, personal representatives and assigns.
- I consent to receiving any medical treatment including ambulance transportation that the event organisers think desirable during or after the event.
- I consent to event organisers using my name, image and likeness before, during or after the event for event promotional broadcasting or reporting purposes in any media.
- I understand that compulsory insurance cover affected for participants in this event may not cover me for any or all injury, loss or damage sustained by me.
- Safety precautions undertaken by organisers (such as course supervision, race safety briefings, bicycle and helmet safety checks) are a service to me and other competitors but are not a guarantee of safety.
- I am fully responsible for the security of my personal possessions at the event.
- My registration is not transferable to other people. If I am unable to complete, or if the event is cancelled by way of circumstances beyond the control of the event directors, my registration fee is non-refundable.
- 10. I have listed below my medical or physical conditions from which I suffer that might affect my performance or be relevant if medical treatment needed. I accept the risk of competing, despite these conditions.**
- I agree to abide by all race rules and directions issued by Triathlon Australia and the event organiser.
- Event organisers may change the event format, course or other race conditions of their discretion. If that occurs, this agreement applies to the changed conditions.

**Medical Conditions (see Item10)**

As a parent or guardian of the competitor- \* I agree to the above for myself and on behalf of my child, \* I indemnify and will keep indemnified all people and corporations associated with the conduct of the event on the terms referred to.

PARENT / GUARDIAN Signature

