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PARTICIPANT AGREEMENT FORM

LAST NAME *PRINT CLEARLY	FIRST NAME *PRINT CLEARLY	DATE OF BIRTH			AGE GROUP (PLEASE CIRCLE)		
		DAY	MONTH	YEAR			
					< 13	13-17	18+
					< 13	13-17	18+
					< 13	13-17	18+
					< 13	13-17	18+

ADDRESS		TOWN / SUBURB		POSTCODE					
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HOME PHONE		MOBILE	
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MEDICAL NOTES: Relevant existing medical conditions, allergies, etc	
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EMERGENCY CONTACT - NAME:		PHONE:												
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EMAIL		<input type="checkbox"/> Please tick this box if you DO NOT want us to use this email address to send you news of our term programs, sales and other special offers.
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PARTICIPANT AGREEMENT & ACKNOWLEDGEMENT OF RISK

- In this Participant Agreement:
 - The "activities" shall include rock climbing activities including indoor and outdoor top rope climbing, lead climbing, bouldering and abseiling.
 - "TRAC" shall mean The Rock Adventure Centre Pty Ltd, Rear 403 Pakington Street, Newtown 3220.
- I am aware that the activities are dangerous undertakings and in undertaking such activities I do so at my own risk.
- I agree that I will not participate in any of the activities before taking part in a training session conducted by an instructor of TRAC.
- I agree that I will not participate in any of the activities or training for those activities if I have consumed alcohol in the twelve hours preceding training or participation in the activities.
- I agree to obey at all times the rules of TRAC and all reasonable requests and directions of instructors of TRAC.
- I accept responsibility for my personal belongings whilst participating in the activities and TRAC is absolved by me from all liability howsoever arising from theft, loss or damage of my belongings whilst participating in the activities whether to not such theft, loss or damage is due to any negligent act, breach of duty, default and/or omission on the part of TRAC.
- I am also aware that it is a condition of participation in the activities that TRAC, its directors, instructors, servants or agents are absolved from all liability howsoever arising from injury or damage howsoever caused (whether fatal or otherwise) arising out of participating in the activities or in any way whatsoever due to any negligent act, breach of duty, default and/or omission on the part of TRAC, its directors, instructors, servants or agents.
- Without limiting paragraph 7 herein, I absolve TRAC, its directors, instructors, servants or agents from any loss, damage or injury caused directly or indirectly from a defect or defects in equipment (including but not limited to, ropes, harnesses and shoes) used by me whilst participating in any of the activities, regardless of whether that equipment is inspected by a director, instructor, servant or agent of TRAC prior to commencing any of the activities.
- I am also aware that any person taking part in the activities carried out by TRAC is only permitted to do so on the distinct understanding that they do so at their own risk.
- In the event that I am injured whilst participating in activities carried out by TRAC and require urgent medical attention, I authorise TRAC to make all arrangements TRAC in its sole discretion shall consider necessary to obtain medical treatment, including but not limited to the request for an ambulance, and I agree to indemnify TRAC for the cost of those necessary arrangements and I release TRAC from any claim if for any reason medical treatment is not obtained or is inadequate.

I DO HEREBY ACKNOWLEDGE that of my own free will and desire I have contracted with TRAC for instruction and training in the activities and that I have read and understood the warnings above. I am signing this form on behalf of myself &/or all participants listed above as their parent/legal guardian or the responsible adult with permission to sign on their behalf.

NAME of Participant OR Name of Parent/Legal Guardian if participant is under 18:	SIGNATURE of Participant OR Signature of Parent/Legal Guardian:	DATE		
*NAME PLEASE PRINT CLEARLY	*SIGNATURE	DD	MM	YY