

LIABILITY WAIVER FOR STUDENTS

This form must be completed and returned to your camp coordinator, then onto SEAFORTH PINES PTY LTD prior to the commencement of the program. This will be held securely on file at our office after the program.

Each school/entity will appoint a "Responsible Person" for the duration of the camp and my child will participate in adventure activity(s) with SEAFORTH PINES PTY LTD as outlined on the program information.

I, _____ (Name)
from _____ (School)

accept that the adventure activity(s) in which I am participating or in which my children are participating have risks involved and that I have ascertained, understood and considered these risks when booking the activity(s). As far as the law permits I indemnify SEAFORTH PINES PTY LTD, its Principals, Staff, Agents and Landlords against any loss which I, my family or property may sustain as a result of participation in the activities in which I/We are participating. I also acknowledge that the activities are of an introductory nature and in no way, prepare us for future participation of Adventure without adequate competent or qualified supervision or specific structure training.

ADDITIONAL TERMS AND CONDITIONS

- In signing this document, I state that my child is in good health and have no existing injury or physical problem that might be aggravated by participation in the activities.
- OR: My child has the following pre-existing condition: _____
_____ and that I accept responsibility for any aggravation of the injury/condition as a result of my child's participation.
- I need to have available the following medication for my child: _____

- I accept that all participants must wear all safety equipment issued to them at all times and my child will not remove this equipment without the specific authorisation of the activity Leader.
- I agree my child will not to leave the area in which the activity is being conducted without obtaining specific permission of the activity leader

CLOTHING

Except where clothing is provided as a safety requirement or as previously agreed aspect of an activity, I will ensure that I/we have adequate clothing for the weather conditions and type of activity. I.e. rubber soled shoes, warm clothing and wet weather gear, camping and personal items, sun hat and sunscreen etc. (ask the activity leader for specific advice). I also will ensure that I have provided any medication that is normally needed and have advised the leader of this requirement.

PHOTOGRAPHS AND VIDEO/DVD

I allow images or photographs and Video/DVD of these activities to be used by the school and SEAFORTH PINES PTY LTD for the school camp online portal, news, blog and school camp souvenir DVD & media. I acknowledged by my signature that I understand the information provided above and am aware of the risks, if any, associated with this.

PARTICIPATION BY PERSONS UNDER 18 YEARS OF AGE

As the Parent or Guardian of the persons under 18 years of age listed below, I have made myself aware of the risks and issues involved with the participation of these minors and am willing to accept responsibility for their participation in the booked Adventures.

| | |
|---|---------|
| Name of participating dependent under 18 years of age | |
| Signed (Parent or Guardian) | |
| Print name (Parent or Guardian) | |
| Date | |
| Emergency Contact | Phone: |
| | Mobile: |
| | Email: |
| Signed (School/ Entity Responsible Person): | |
| Print Name | |
| Date | |
| | |