

# GREAT BARRIER REEF FESTIVAL

WHITSUNDAYS • QUEENSLAND 1 - 4 AUGUST 2019

## RECYCLABLE REGATTA CONSENT FORM

### ENTRANT DETAILS

Name:

Event Entered:

Age:

School (if applies):

Grade (if applies):

### MEDIA CONSENT

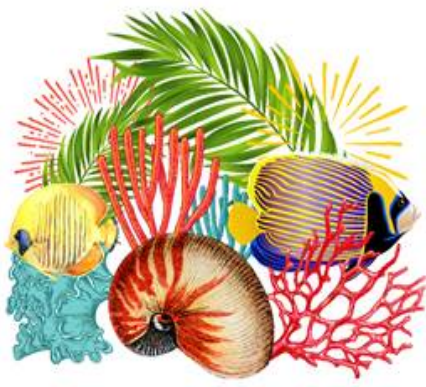
I authorise the Great Barrier Reef Festival to take and use, photographs, video or sound recordings of my child and any other reproductions or adaptations of my child's likeness ('the material'), either in full or part, in conjunction with any wording, creations or actions.

I understand this material may be used for the purposes of advertising, promotion, media publicity and publication, display or internet usage of the purpose in whole or in part. I understand that I, or my child, do not have any interest in the copyright to the material nor shall we receive any payment.

### OCEAN WATER CONSENT

I agree that ocean water activities have inherent risks, not all of which can be listed here. Among the more obvious and frequent are:

1. Exposure to extremes in weather than may cause injury or sunburn, sun-stroke and dehydration;
2. Marine stingers and other marine life which may lead to injury including serious injury or death;
3. Contact with and possible immersion under water for undetermined periods leading to possible suffocation or drowning;
4. Exposure to capsizing, sinking, rocks, rope entanglement, current patterns and many other possible sources of 'in water' injury or entrapment;
5. Being at a beach location where communication may be poor and may be an inability to get rescue or medical assistance needed easily or quickly and that the risk of serious injury, harm or death may follow.
6. I have sufficiently trained for the Event, and am a competent swimmer. I am not aware of any illness, injury, physical disability or impairment which may be detrimental to my health while participating in the Event; and I enter and participate in the Event entirely at my own risk.
7. I waive all and any claims, rights or causes of action, which I may otherwise have for, or arising out of, loss of life or injury, damage to person or property of any description whatsoever, which I suffer or sustain in the course of or as a result of my entry or participation in the Event. This waiver shall be and shall operate separately in favour of all persons, corporations and bodies involved or otherwise engaged in organising, promoting or staging the Event.
8. I wholly release and discharge the Event Organiser, promoters, marshals, volunteers and any person or body directly or indirectly associated with the Event, from all claims, demands and proceedings of any kind arising out of or connected with my participation in the Event and I indemnify them (individually or collectively) against all liability for any claim, injury or damage is attributed to the act or neglect of any one or more of them.
9. I certify that I am 18 years or older, or that I am the parent/ legal guardian of the Participant who is under the age of 18 years, (and 12 years or older) and I have read this Consent Form and fully understand it.



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10. The Event Organiser will collect and use and disclose personal information for the purposes of conducting and administering the Event and other related activities, including for identifying participants, recording results and communicating with participants, and for providing participants with promotional materials for other events or sponsor offers.

I have read all terms and conditions of my participation in the Event, including the conditions set out in this Consent Form above about publication of my name/image, compliance with directions/by-laws, limitation of liability, disclaimer, indemnification and other matters as are set out in the on-line registration site viewed by me and I accept and intend that I be legally bound by these terms and conditions.

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**I authorise Great Barrier Reef Festival to take actions indicated above.**

Signature:

Date:

**PARENTAL CONSENT (if entrant is under 18 years)**

As a parent or legal guardian, I agree to this Consent Form for and on behalf of the participant.

Full Name of Parent / Guardian:

Address:

Email:

Mobile:

Signature:

Date: