

REGISTRATION FORM

For The Tamborine Mountain Classic Ride / Walk / Run on 16/11/08

Name: _____

Postal or e-mail Address: _____

Contact Phone Number: _____ Date of Birth: _____

Please Tick the event you are entering:

25Km cycle 50Km cycle 50Km challenge cycle
 5Km walk/run 10Km walk/run

We would appreciate the following donations please:

\$15 donation per adult entrant in walk / run
\$20 donation per adult entrant in cycle
\$40 donation per adult entrant in the Challenge Event.

Or obtain sponsorship per kilometre. Sponsorship forms are available on the website.

Thank you very much.

Donations can be paid by cash, cheque or credit card. Please make cheques out to PresCare Roslyn Lodge. Any donation over \$2 are tax deductible.

PLEASE REGISTER BY 12 NOVEMBER 2008 FOR CHALLENGE EVENT

Early registration would be appreciated from all entrants but will be available on the day.

Please sign the indemnity clause below.

INDEMNITY and RELEASE

- (1) Except where provided or required by law and as such cannot be excluded, I agree that it is a term of my registration that for myself, my executors, administrators, heirs, next of kin, successors and assigns, I hereby: (a) Waive and release all claims that I may have against the organiser, volunteers, PresCare and Roslyn Lodge and other accredited supporters ("the releasees") involved in this event, together with any costs including legal fees that may be incurred as a result of any such claim whether valid or not; and (b) indemnify and hold harmless the releasees and each of them against any such claim that I or my guests or any one or more of my executors, administrators, heirs, next of kin, successors and assigns may have or assert and against any costs including legal fees with respect to such claims.
- (2) If I am in breach of the terms of entry I agree to recompense the appropriate party and all loss and damage (including legal fees) arising out of such breach, including any damage to the party's reputation.
- (3) I acknowledge that participating in this event may involve a real risk of serious injury or even death from various causes including but not limited to: over exertion, dehydration and accidents with other participants, spectators or road users. I attest and verify that I am physically fit and have sufficiently trained for the Event and its related activities and that I have not been advised by a qualified medical practitioner not to enter.
- (4) The event has a privacy policy and the information I have provided on this form is necessary for the conduct of this event and will only be used for the purpose of conducting the event.
- (5) I agree to abide by the Queensland road rules throughout this ride/walk/run.
- (6) I consent to the publication and/or use in any form of media whatsoever of my name, image, voice, statements or otherwise, without payment or compensation.
- (7) The organisers retain the right to refuse entry into the event.
- (8) I have voluntarily entered into this agreement and have read, understood and acknowledge the terms of entry including the warning, exclusion of liability, release, indemnity and information provided elsewhere in the registration form.

I hereby acknowledge that I have read, understood and accept this agreement.

Signature _____ Date _____

Please note you must personally sign this agreement.

Declaration of Minors

If you are under 18 years at the time of entering the Event, this declaration MUST be signed by your parent or guardian.

I _____ of _____
Certify that I am the parent/guardian of ("the minor") who will be participating on the day of the Event. In consideration of the Organiser accepting the minor's application to participate in this Event. I agree to indemnify and shall keep indemnified the Organisers in respect of any losses they or any of them may suffer as a consequence of any claim/s by the minor and to the same extent as any other competitor indemnifies the Organisers pursuant to the clause 1 above. I specifically consent on behalf of the minor to the publication and/or use in any form of media whatsoever of my name, image, voice, statements or otherwise, without payment or compensation.

Signature of Parent/Guardian _____ Date _____

PLEASE RETURN FORM TO PRESCARE ROSLYN LODGE, or Mail to
24 Main Western Rd, North Tamborine Q4272 or FAX 5545 7811 or email to vdunlea@prescare.org.au

For more information please visit our website www.prescare.org.au