



Shire of Cunderdin

Social Badminton program registration

Shire of Cunderdin | PO Box 100, Cunderdin WA 6407
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Participant Details:

Full Name: _____

Physical Address: _____

Mobile Number: _____

Email Address: _____

Medical Conditions/Medications: _____

If you are under the age of 16, you will require Parental/ Guardian's approval to partake.

Guardian Full Name: _____ **Guardian's Signature:** _____

Emergency Contact Details:

Contact Person: _____

Contact phone: _____

Participant Declaration:

I am able to play and commit to the following days:

- | | |
|--|---|
| <input type="checkbox"/> Session 1 – 18 October 2021 | <input type="checkbox"/> Session 5 – 15 November 2021 |
| <input type="checkbox"/> Session 2 – 25 October 2021 | <input type="checkbox"/> Session 6 – 22 November 2021 |
| <input type="checkbox"/> Session 3 – 1 November 2021 | <input type="checkbox"/> Unsure of dates; casual participation. |
| <input type="checkbox"/> Session 4 – 8 November 2021 | |

Disclaimer:

1. I, the undersigned in consideration of acceptance of my entry in the Social Badminton program for myself and executors hereby waive all claim, right or course of action which I might otherwise have arising out of loss of my life, or injury, damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon my participation in this event.
2. I understand and accept that I play at my own risk and that Shire of Cunderdin, its staff and volunteers do not accept any responsibility for any loss, damage or injury to me as a player or participant in the Mixed Social Netball program.
3. This waiver, release and discharge shall be in favour of all persons and bodies involved or otherwise engaged in staging the event.
4. I release, indemnify and hold harmless the Shire of Cunderdin, its servants and agents, from and against all and any actions or claims which may be made by me or on my behalf or by other parties for or in respect of or arising out of injury, loss, damage or death caused to me or my property whether by negligence, breach of contract or in any way whatsoever.
5. I give permission for the use of my image, name, voice or photograph in any broadcast, telecast, advertising, promotion or other account of this event including advertising and promotions for future events.
6. I participate in the activity at my sole risk and responsibility.
7. I am medically fit to participate in physical exercise and don't have any current medical conditions that prohibit me to participate in sport activities.
8. I agree to abide by the Rules and conditions of the program and I have read and understood the above waiver.

Signature: _____

Date: _____