

**Launceston Athletic Club Inc
2010 Registration Form**

Post to: PO 885 Launceston 7250 or drop into Life is Good 137 George St.

www.launcestonathleticclub.com

Name: _____

Postal Address: _____

Ph Contact: _____ Email: _____ @ _____

Date of Birth: ____/____/____

Membership Type

- Div 1 \$25.00
- Div 2&3 \$5.00
- Social Mbr \$12.00
- Family \$50.00

Family consists of 2 adults and 2 or more school children under 18:

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Disclaimer

WARNING, RELEASE AND INDEMNITY

RISK WARNING: These are physically demanding events and requires training and fitness. It is a recreational activity that involves a significant risk of impairment of a participant's physical condition or injury and even death from various causes including; dehydration, over exertion and accidents with other participants, spectators or road users.

DECLARATION, WAIVER AND RELEASE : In consideration of, and as a condition of acceptance of my Registration to Launceston Athletic Club, I declare and agree that:

1. I am physically fit and have trained for these events. I am not aware of any medical condition, impairment, disease, illness or any other reason why I should not participate in the events and that I have not been advised by a qualified medical practitioner not to participate. Where I become aware of any medical condition or impairment, or am otherwise sick or injured prior to or during the event, I will withdraw from or discontinue my participation in the event.
2. My participation in the LAC fun runs is at my own risk and I acknowledge the above risk warning.
3. I release LAC, its officers, committees, agents, representatives, members and event sponsors, from and against any claims of any kind (whether at tort, contract or statute) including personal injury, death or property damage, however caused (including negligence) and arising out of my participating in the LAC fun runs.
4. I understand and acknowledge that LAC does not make any warranty (implied or express) that event services will be provided with due care and skill.
5. I indemnify that LAC, its officers, committees, agents, representatives, members and event sponsors, from and against any claims made against them arising from personal injury, death or property damage caused to another person by me in the course of my participation in this event.
6. My name, likeness and image may be recorded and used by LAC (mainly form of media and webpage) for activities associated with or incidental to this event, including the promotion of the event, without my permission and without any form of compensation to me. If you do not agree for my picture to be used for the above purposes please tick this box
7. I consent to receiving treatment from a qualified medical practitioner during or immediately after the event if unable to provide consent at the time such treatment is deemed to be required.
8. This agreement is governed by the laws of Tasmania. If any part of this agreement is held to be invalid or otherwise unenforceable then that part will be deemed to be severed without affecting the enforceability of the remainder of this agreement.

Signed: _____ Date: _____

(A parent or guardian must also sign for a junior member)

Please tick the box if you require a receipt?