



STAWELL AMATEUR ATHLETIC CLUB

Registration / Membership Form

NAME :

DOB: **CATEGORY:** Sub-J Jnr Snr Vet Other

ADDRESS:

PHONE: **H:** **W:** **M:**

EMAIL:

NAME:

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i) **Known Medical Conditions:**

ii) **Privacy Release:**

The "Privacy Act 2000" sets out new laws in relation to collection of personal information. At Stawell Amateur Athletic Club, this information may include names, addresses, email addresses, telephone numbers, membership details, medical details, family details, and results of club meets. We commit to only collecting information that is necessary for the conduct of normal club activities and events, and for the safety of members and participants in club activities and events. The information will be available for use by club officials, committee members and general members only for the express purpose of running club activities and events, publishing event results and ensuring participants' safety. In providing information to the club of a personal nature, you agree that you understand its necessity and agree with its use as outlined here, unless you specify otherwise. If you have any questions regarding our compliance with legislation, or the use of your personal information, please contact one of our club officers.

iii) **Disclaimer:**

1. I acknowledge that Stawell Amateur Athletic Club events involve the real risk of serious injury or even death from various causes including exertion, equipment failure, dehydration, accidents with other competitors, spectators or road users, course or weather conditions, and other causes.
2. I understand that I should not compete in this event unless I have trained appropriately
3. By competing I accept the risks necessarily flowing from my participation which could result in following loss of life or presumed injury. Accordingly I release all persons or corporations associated directly or indirectly with the conduct of the event from all claims, demands, and proceedings arising out of my participation and I hereby indemnify against all liability, including liability for their negligence and the negligence of others for all injury, loss or damages arising out of or connected with my participation. This release will extend to Stawell Amateur Athletic Club Officers, agents and volunteers including medical and paramedical personnel appointed for the event, the owners, licensees and occupants of land on which the event or any part of it is conducted, any statutory body or local authority having control upon which the event or any part of it is conducted or which is involved directly or indirectly with the event in any manner whatsoever. I consent to myself or my dependents receiving medical treatment that the event coordinators think desirable during the event.
4. I consent to event organisers and the club officers or their appointees using my name, images, or likeness, before, during or after the event for event promotional, broadcasting or reporting purposes in any media, including on the official Stawell Amateur Athletic Club website, www.saac.com.au
5. Safety precautions undertaken by organisers such as course supervisors, race safety briefings, safety checks are a service to me and other competitors but are not a guarantee of safety.
6. I am fully responsible for the security of my personal possessions at the event.
7. I agree to abide by all race rules and directions issued by the event organiser(s).
8. I, we have read this document and I, we understand its conditions.

Signature (Parent/Guardian if Under 18):

Date:

Signature (Parent/Guardian if Under 18):

Date: