

Marion Brownlie

Stretching training waiver form

60 Coronation Avenue, Glen Innes NSW 2370

VOLUNTARY ASSUMPTION OF RISK, WAIVER, RELEASE AND INDEMNITY BY A PARTICIPANT WARNING: THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR RIGHTS. PLEASE READ THE ENTIRE DOCUMENT CAREFULLY. ALL PARTICIPANTS MUST ACCEPT THESE CONDITIONS.

1. I understand and acknowledge that participating in training organised and conducted by Marion Brownlie is an activity and is in the nature of **sport**. As such it has inherent dangers and risks. **I am aware of the hazards involved and acknowledge that there is always risk of injury (including permanent injury, mental injury, paralysis and death.) and damage to my property.** The hazards include but are not limited to: remoteness of from assistance or medical aid, the nature of the exercise include, actions of participants and spectators, weather conditions, wildlife, heat exhaustion, condition or suitability of participants equipment. **In my judgment I have sufficient competence, to participate in activities in a manner safe to myself and others.**
2. I certify that I am physically fit for participation in the exercises. I certify I have not been advised by a qualified medical person that I should not participate in this type of physical activity and that I have been given the opportunity by the organiser to review the event as thoroughly as possible and ask questions regarding the event prior to my participation.
3. I further acknowledge and agree that I am undertaking the activity and event freely, voluntarily and absolutely at my own risk with a full appreciation of the nature and extent of all risks involved in the activity.
4. In consideration of being allowed to participate in stretching exercises/classes (on my own behalf and on the behalf of my executors, administrators, heirs, next of kin, successors' and assigns):

(a) Waive, release and discharge, to the full extent permitted by law, from any and all liability from death, disability, personal injury, property damage, property theft, and other loss and/or damages and all other risks, claims or actions of any kind (including breach of contract, any negligent or tortious act or omission, breach of duty or breach of statutory duty) whatsoever and however occurring, together with any legal fees incurred as a result of such claim whether it be valid or not, which at any time I have had or have as a result of or in connection with, directly or indirectly, my participation in and my traveling to and from the property at 60 Coronation Avenue, Glen Innes the following persons and entities: Marion Brownlie, its directors, employees or agents, owners of any property upon which I enter and their(its) representatives, directors, employees, independent contractors, sponsors, representatives, agents, members and volunteers, including medical and paramedical personal appointed by Marion Brownlie.

(b) INDEMNIFY AND HOLD HARMLESS the persons mentioned in paragraph 3(a) from any and all liabilities claims or actions (including negligence) whatsoever and however caused or arising as a result of or in connection with, directly or indirectly, my participation in or traveling to and from, including any claim by my (or my team's) support crew or any person assisting me or my team;

5. I acknowledge that I am responsible for my personal possessions during the activity and all times I am on the property.

6. I accept the communications, search, rescue and medical aid arrangements put in place by the organisers. I understand and agree that in the first instance I am responsible for the provision of first aid to myself and those around me. I am responsible for myself and my timely removal from the property to a medical facility. I give my consent to receive any first aid and medical treatment which may be deemed advisable in the course of an accident, injury and/or illness as a result of my involvement in any activity.
7. I agree to allow my photograph, video, multimedia or film likeness and or name to be used for any legitimate purpose by Marion Brownlie, its sponsors or assigns without payment or compensation.
8. I acknowledge that Marion Brownlie will not arrange insurance to cover me whilst I participate in any training or activity on the property. I am responsible for my own personal accident insurance and ambulance cover.

Warning you make your own risk assessment about the possibility of contracting coronavirus (COVID-19) and take the appropriate precautions. We will not be held responsible if you contract this.

By signing you are also acknowledging that you are a friend of Marion and all moneys contributed are either gifted or donated.

9. I have read and understand this waiver of my legal rights and the indemnity I am giving.

Print Participant's full name.....

Parent/career/guardian full name.....

Signature.....Date.....

Please ensure you have read and understood the waiver information for the Stretching Classes before signing this form. It is available at for download at www.marionbrownlie.com

Name	Parent / Guardian	Signature	Paid Junior/J senior/s	Date