

May 2016 – Awaba St & Balmoral Beach, Mosman

TRAINING SESSIONS

HEALTH WAIVER FORM

ENTRANT DETAILS (PLEASE USE A SEPARATE FORM FOR EACH ENTRANT – PRINT IN BLOCK LETTERS)			
Gender: Male Female	DOB (DD/MM/YYYY)	:/	
Address:			P'code:
Work Phone:	Home Phone:	Mobile:	
Email:			
Any Medical Conditions:			
Contact in case of emergency: Na			
TRAINING SESSIONS	Sunday 1 May Sunday 8 May Sunday 15 May Sunday 22 May		
PARTICIPANT'S AGREEMENT: I, the un Burn Training Sessions for myself, the Humpty Dumpty Foundation claim, right or causes of action,	my heirs, executors and ad n and Lawrance Hunting P	Iministrators hereby waive, re ersonal Training and its office	lease, discharge and indemnifyers and agents in relation to any
(i) Loss of life or injury, damage of upon my entry or participation is		ver, which I will suffer or sustain	n in the course of or consequent
(ii) Any publication of name/s or or otherwise. I declare that I has other physical disability or impa	image/s resulting from partions sufficiently trained for the	nis event and that I am not a	ware of any illness, injury or any
I acknowledge that my registra Policy of the Humpty Dumpty For or discharge shall be and ope engaged in promoting or stagir and includes, but is not limited to representatives; NSW Police, Mo whether or not the loss, injury or and obey any direction given to Training. I declare that the information	oundation as located on the rate in favour of all personing the event and the servanto, The Humpty Dumpty Fosman Municipal Council, Stramage is attributed to the meter on behalf of the H	ne Humpty Dumpty Foundations, corporations, schools and ints, agents, representatives of undation and Lawrance Hurate Emergency Services, officine act or neglect of any or umpty Dumpty Foundation of the context of th	ion website. This waiver, release d bodies involved or otherwise and offices of all or any of them ating Personal Training and their cials, marshals and shall operate more of them. I agree to follow and Lawrance Hunting Personal
Signed:	OR	(If entrant under 18) Parent/Guardian Signature: _	
Date:		Date:	