

ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS PRIOR TO ACTIVITY

DALMENY NAROOMA BUSHWALKERS INC.

Leader: _____ Activity date: _____

Activity name: _____ Activity grading: _____

In voluntarily participating in the above activity, I am aware that I am risking injury, illness and death, and loss of or damage to my property. Typical risks may include but are not limited to hyperthermia, hypothermia, slipping on loose or icy surfaces, slipping on rocks, falling rocks, exposure, snake bite, bee stings and other insect attacks, burns, drownings, stepping into unseen holes, accidents during vehicle travel to walks, navigation errors and becoming lost. To minimise risks, I will:

- inform myself of the nature of the activity and ensure that it is within my capabilities;
- carry food, water, medication, clothing and equipment appropriate for the activity;
- advise the leader of any physical or other limitation, or any dependence on medication, that may require urgent attention during the activity;
- make every effort to remain with the rest of the party during the activity;
- advise the leader of any concerns I am having; and
- comply with all reasonable instructions of the leader.

I understand these risks and requirements. If a temporary member, in signing this form I acknowledge that I have been granted temporary membership of Dalmeny Narooma Bushwalkers Inc.

	Name	Signature	Member or Temporary Member Write M or T	In case of an emergency, your contact's name & phone number
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Note: A visitor is a 'temporary member' and must be 18 years or older. Leader: please submit this form to the secretary or another committee member after your activity is completed.

3 Feb 2024