



Leader: _____

Activity Date: ____ / ____ / 20__

Route Title: _____

Listed Grade: _____

Please read carefully: -

- 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 slippery and/or uneven surfaces including rocks and branches, falling to the ground or ledge, rock scrambling, rocks and logs being dislodged or thrown, being hit by rocks or logs from above, falling at edges of cliffs or drops, floods, swimming and walking for prolonged periods in cold water, difficulty in swimming in aerated water at the base of falls, difficulty in climbing out of deep water onto slimy rocks, hypothermia, heat exhaustion, hyperthermia, dehydration, sunburn, muscle strains, equipment failure, rope failure including rope wear, harness not tied correctly, slipping whilst abseiling, rope too short, hair and clothing being caught in the abseil device and jamming it, anchor failure, belayer not being attentive, rope play, group being delayed and/or disorientated, scrambling over wet, slippery rocks and boulders, moving continuously on foot for prolonged periods such as 10-14 hours, carrying a pack weighing up to 20kg for the duration of the activity.

I accept there are risks associated with this activity and confirm that:

- I will inform myself of the nature of the activity and ensure that it is within my capabilities;
- I have abseiling experience and/or I have completed at least a basic training course with a professional abseiling organization
- I am carrying food, water and equipment and wearing clothing and footwear appropriate for this activity
- I will advise the leader of any physical or other limitation, or any dependence on medication, that may require urgent attention during the activity;
- I do not believe that my medication or limitations will prevent me from successfully completing this activity
- I will make every effort to remain with the rest of the party during the activity
- I will note any risk warnings given prior or during the trip
- I will advise the leader of any concerns I am having
- I will comply with all reasonable instructions of the leader.
- I will advise the leader of any illness/injury/misadventure which may/will affect my ability to participate during the trip which requires medical attention
- I have read or heard and understand these requirements
- I have considered the risks before choosing to sign this form
- I still wish to join the activity
- I agree by signing this form to waive any claim for damages arising from this activity that I may have against the club, the leader or other participants
- In the event of my death, this waiver will bind my estate.

I understand these risks and requirements. If a temporary member, in signing this form I acknowledge that I have been granted temporary membership of the above-named club.

* This AoR will cover Full Members, Prospective Members and Guests. A 'Temporary Members' is a Prospective or a Guest under Bushwalking NSW guidelines. In the Member column below, indicate if you are a full (F) or prospective (P) member, or a guest (G).

	NAME (PRINT)	Signature	Member (F/P/G)	Your mobile No.	Emergency Contact No.	1st Aid Y/N
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Walkers who leave the activity early.

Write the name and time the walker left below

1			3		
2			4		

Send in your walk report: Please submit your report as soon as possible. This becomes especially important if contact tracing becomes necessary. All walk reports are now submitted via the website using the "Post Walk Report" form. To do this, you log on to the website, click on "Members", click on "Leaders" and then complete the details on the "Post walk report" form.

Emergency Contacts: Emergency Services call 000 or use Emergency+ app on your phone to give your location.

Use a PLB only if there is danger to life or limb AND NO PHONE RECEPTION.

Bush Club Emergency Contacts: Graham Conden 0418 647951; Keith Maxwell 0431 262101; Tony Hickson 9419 2546, 0417 200 980