



# ELTHAM & ENVIRONS WALKING GROUP

## TEMPORARY MEMBERS & VISITORS

*Before commencing any activity all temporary members (visitors) are required to sign this acknowledgement of risk form.*

In voluntarily participating in an activity of this Group, I am aware that my participation in this activity may expose me to hazards and risks that could lead to injury, illness or death or to loss of or damage to my property.

### ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS

These risks include but are not limited to: slippery/uneven surfaces, loose rocks, underwater hazards, drowning, sunburn, falling trees/branches, pits/trenches and hypo/hyperthermia. To minimise these risks during activities I will:

1. Ensure activities are within my capabilities.
2. Carry water, food, sunscreen, personal medication, protective clothing, appropriate equipment, a whistle and a basic first aid kit.
3. Remain with the rest of the party during the activity.
4. Carry 'Emergency Information' detailing any critical medical information and person(s) who can act on my behalf.

I have read and understand these requirements and risks and accept that in signing this form I take responsibility for my actions, I also acknowledge that I have been granted temporary membership to Eltham Environs Walking Group.

Name (print) .....

Address (print) .....

Post Code ..... Phone No: ..... Mobile No: .....

Email: .....

### Emergency Contact

Name: .....

Home Address: .....

..... Post Code: .....

Telephone: Home ..... Mobile .....

Relationship: .....

### Medical Information

Any important current medical condition or allergy information

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**Signed:** .....

**Date:** .....