# 2021 WAKA AMA LONG DISTANCE NATIONALS

RACE	
WAKA	
#	

Team Name:	Division:
Club Name:	

# **W6 TEAM – J16 DIVISION**

### **EVENT WAIVER & AUTHORITY FORM - PARTICIPATION INDEMNITY**

#### **EACH PADDLER MUST READ THIS BEFORE SIGNING**

I, hereby declare I have read and understand the rules of the **2021 Waka Ama Long Distance Nationals** race ("the Event") and I agree to abide by the rules of the Event:

- 1. My accepted entry will not be transferred to another entrant.
- 2. In the event of any "act of God" conditions causing a cancellation of the event, my total entry fee is not transferable or refundable.
- 3. I acknowledge that there are risks involved with Waka Ama and fully realise the dangers of participating in an event such as this and fully assume the risks associated with such participation and my well being during the event.
- 4. I understand and agree that situations may arise during the event, which may be beyond the immediate control of officials or organisers, and I must continually participate in a manner that does not endanger either myself or others.
- 5. Neither the organisers, the sponsors nor other parties associated with the event shall have any responsibility, financial or otherwise, for any risk incident that might arise, whether or not by negligence, from any direct or indirect loss, injury or death that might be sustained by me or any other party directly or indirectly associated with me, from my intended or actual participation in the event or its related activities.
- 6. I authorise my name, voice, picture and information on this entry form to be used without payment to me in any broadcast, telecast, promotion, advertising, or any other way pursuant to the Privacy Act 1993.
- 7. I agree to comply with the rules, regulations and event instructions of 2021 Waka Ama Long Distance Nationals
- 8. I consent to receiving medical treatment which may be advisable in the event of illness or injuries suffered during the event.
- 9. I hereby waive, release and discharge from any and all liability for death, disability, personal injury, property damage, property theft and all other foreseeable risks, claims or actions of any kind (including negligence) whatever and however occurring which may arise, at any time, from or in connection with, directly or indirectly, my participation in the Event, the following persons or entities; the Event Organisers, Event officials, volunteers and personnel, land managers and or/owners, event sponsors and funders, and all of their respective officers, directors, employees, independent contractors, representatives, agents and volunteers.
- 10. I certify that I am older than 11 years of age or will be turning 11 within the calendar year of the Event.
- 11. I understand that it is compulsory for me to wear a PFD during the race.

I understand that our team is responsible for ensuring all required safety equipment is onboard our waka during the race including:

6 PFD's (must be worn)	Spray skirt
2 Spare Paddles	Flare OR Cellphone in a waterproof case
2 Bailers	Tow rope

(tick box) (tick box)

I, also understand that the Race Committee of the Event shall have the final decision on withdrawing entry for non-compliance with rules for the Event and/or issues of safety concerning the canoe, equipment and the participant's capability be it, as a team or individual.

DEO EO CICALLAZANZED	,
PTO TO SIGN WAIVER	,

I have read and voluntarily sign this Waiver, Release and Liability Discharge Form and explicitly agree to its content.

## If Competitor is under 16 the Waiver must be signed by Parent or Guardian

	Paddlers Name	Signature	Parent/Guardian Name (if required)	Age
1				
2				
3				
4				
5				
6				