**Ngā Tai e Whā o Taranaki, 8 March 2025**

**Team:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Club:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Event entered:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Team Contact Person:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Contact Cell:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Email :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I declare that:**

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 wellbeing 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 2020.
7. I agree to comply with the rules, regulations and event instructions of (*name of event*).
8. I consent to receiving medical treatment which may be advisable in the event of illness or injuries suffered during the event.
9. I confirm that I can swim 50 Metres/OR if I cannot swim 50 metres I will wear a PFD during the race



***If Competitor is under 18 the Waiver must be signed by a Parent or guardian.***

**Each team must assign a Captain and provide a cell phone number that will be on the waka during the race. This is a part of the safety and rescue procedures for this open sea event.**

**Email Completed forms to Rosie, Race Admin at** [**rosie.taranakiocc@gmail.com**](mailto:info.taranakiocc@gmail.com)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Paddlers full name** | **Signed** | **Medical Conditions** | **Date of Birth** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Team:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Club:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Event entered:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Waka Captain**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Waka Cell Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOCC Use only**

Race number **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Safety Check Complete **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Race Details**

|  |  |  |
| --- | --- | --- |
| **Race1: Short Course** | **8 -11km** | **W6 Women / Men / Mixed**  **W1 &W2 Women / Men / Mixed** |
| **Race2: Long Course** | **19 -22km** | **Women / Men / Mixed** |

**IMPORTANT REGISTRATION INSTRUCTIONS**

Please register your intent to race online with Waka Ama NZ

**AND**

email the registration and event waiver form to Rosie, Race Admin at [rosie.taranakiocc@gmail.com](mailto:info.taranakiocc@gmail.com).

All participants (teams and individual) must complete an event waiver. The event waiver is included as part of the Registration and Event Waiver Form and can be found online here:

[Ngā Tai e Whā o Taranaki](https://www.wakaama.co.nz/racecalendar/lookup/2290)

Early completion and submission will speed things up on race day.

**Race Fee:**

$25.00 per person for 1 Race $35.00 for 2 Races

**Payments**

Please pay by direct credit to:

Taranaki Outrigger Canoe Club

15 3953 0774834 003

Please put the following details to identify your payment:

|  |  |  |
| --- | --- | --- |
| **Payment Identifiers** | **Required info** | **Example** |
| Particulars - | Club Name | Taranaki OCC |
| Code - | Race & Waka Hire | Short & Waka |
| Reference - | Team Name | Wairere |

**Refund Policy**

* No refunds will be given for any withdrawals after 2 March 2025
* No refund will be given if the event is cancelled due to a natural disaster or extreme weather