**Activity name / date / leader**

**ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS OF MEMBERS AND TEMPORARY MEMBERS**

In voluntarily participating in activities of the Club which are described to me by the activity leaders I am aware that my participation in the activities may expose me to hazards and risks that could lead to injury, illness, or death or to loss of or damage to my property. I also acknowledge that activities may involve encountering weather conditions that could lead to hypothermia and/or being in locations where evacuation for medical treatment may take hours or days.

The risks associated with this activity include:

* Weather – rain, wind, storm
* Falling trees/branches
* Trips and falls – bark/debris on track
* Fauna – snakes, bees, etc.
* Vehicles
* xxx

To minimise risks I will endeavour to ensure that:

* 1. I have considered and acknowledge (to the best of my knowledge) that this activity is within my capabilities,
	2. I am carrying food, water, medication, and equipment appropriate for the activity.
	3. I have advised the activity leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity.
	4. I will make every effort to remain with the rest of the party during the activity.
	5. I will advise the leader of any concerns I am having
	6. I will comply with all reasonable instructions of club officers and the activity leader
	7. I am compliant with the prevailing State Government rules (if any) regarding COVID vaccination status as it relates to my participation in this activity, and will comply with any other State Government requirements.

I declare that I exhibit none of the following acute respiratory infection symptoms: cough, shortness of breath, sore throat, fever, nasal congestion, runny nose, loss of taste or smell. I will inform the leader if any of these symptoms occur between now and the activity.

I further declare that in the last 14 days I have not been overseas, have not been in close contact with anyone who has travelled overseas, have not had close contact with anyone under investigation for, or with a diagnosis of, COVID-19; and I am not awaiting COVID-19 test results.

I have read and understand these requirements. I have considered the risks before choosing to sign this acknowledgement form and wish to join this activity. I accept that I will take responsibility for my own actions.

**PLEASE EMAIL THE LEADER PRIOR TO THE ACTIVITY TO ADVISE YOUR ACKNOWLEDGEMENT OF THESE RISKS**