



ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

Post Shock Pty Ltd Games Day Event

Date: 30 June 2018 – 1 July 2018

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING OR ATTENDING THIS ACTIVITY OR EVENT, run by **Post Shock Pty Ltd**, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by the group, or because of their possible liability without fault. I certify that I am physically fit and/or have **not** been advised to **not** participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in these activities.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of **Post Shock** and that it will govern my actions and responsibilities at current and future **Post Shock** activities or events.

In consideration of my application and permitting me to participate in **Post Shock** event/s, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event,

(B) I INDEMNIFY, HOLD HARMLESS, AND WILL NOT SUE **Post Shock Pty Ltd** and/or the persons organizing this or future **Post Shock** events and waive them from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

I acknowledge that this activity or event may test a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to participants, but are also present for volunteers. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event, or future **Post Shock** events in which I participate.

In the case of **Post Shock** overnight camping events, I assume the responsibility for the decision to consume alcohol and **Post Shock Pty Ltd** disclaims any responsibility for monitoring such use.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law for all activities administered by **Post Shock Pty Ltd** in which I chose to participate.

I acknowledge that Dodgebow Pty Ltd may contact me via email at the below address and that I can opt out of those communications at any time should I wish to.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Name: _____ Date Of Birth: _____

Email Address: _____

Signature of Participant or Guardian: _____