



REDLAND BUSHWALKERS Inc.

Visitor Waiver Form

Visitor Waiver Form Ver 3.0 01-05-09

Date of Activity		Leader/s	
Activity Name		Type of Activity	

We, the undersigned, acknowledge that by participating in the above activity of the Redland Bushwalkers Inc we may be exposed to levels of risk that could lead to injury, illness or death or to loss of or damage to my property.

To minimize these risks, as individuals we:

- Understand the scope of the activity
- Believe the activity is within our capabilities
- Are carrying food, water and equipment appropriate for the activity.
- Will follow any reasonable instruction of the Activity Leader
- Have advised the activity leader of any medication or any physical or other limitation that might affect our participation in the activity
- Are aware that there may not be any person with First Aid qualification on this activity.
- Will ensure that we do not become separated from the rest of the party during the activity and will notify the leader or another member of the party if it is necessary to stop.

We acknowledge that while the activity leader has taken reasonable steps to ensure that the activity is conducted in a safe manner, unforeseeable circumstances may arise during the activity.

We, as individuals, have read and understood the requirements of the activity and undertake the activity at our own risk.

By signing this document we waive any claims against Redland Bushwalkers Inc, its Members and Activity Leader for cost, loss or damage incurred or suffered by me during the course of or arising from this activity.

\$5.00 Probationary Membership Fee is Payable prior to activity

NAME	SIGNATURE	FEE PAID, YES/NO

On completion of activity all completed forms to be returned to
 Outings Officer Database Officer Secretary