Diamond Valley Bushwalking Club Inc
P.O. Box 536
ELTHAM VIC 3095

Acknowledgement of Risks and Obligations by Members

Member 1 _____ **Member 2** _____
(Complete full name) *(complete full name)*

In voluntarily participating in an activity of this club, I am / we are aware that this may expose me / us to risks that could lead to injury, illness or death or to loss of or damage to my / our property.

In particular, I am / we are aware that bushwalking and other outdoor activities undertaken by the club, by their nature, involve inherent risks beyond the accepted safety of home and work.

Additional dangers or risks may include physical exertion for which a walker is not fully prepared, weather extremes, difficult terrain, remoteness from normal medical services and occurrences such as snakebite or other medical emergency.

I / we acknowledge that the Club relies on the support of volunteer leaders who may not be formally trained in bushcraft, navigation, or first aid. In undertaking an activity of this club I / we agree to accept such dangers and risks.

To minimise these risks, I / we will endeavour to ensure that this activity is within my / our capabilities and I / we will be carrying food, water and equipment appropriate for the activity.

I / we will advise the activity leader if I am /we are taking any medication or have any physical or other limitations that may affect my / our participation in the activity.

I / we will make every effort to remain with the rest of the party during this activity.

I / we have read and understand these requirements.

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Signature of Member 1 above *Signature of Member 2 above*

Date ...../……/…… Date ...../……/……

OFFICE USE ONLY
Received this day of 20….

Signature on behalf of the Committe