



**VISITORS' ACKNOWLEDGEMENT OF RISK**

*Before commencing any activity with the member club all temporary members (visitors) are to sign this acknowledgement of risk form*

**Leader's Name:** ..... **Grade of Walk or Activity:** .....

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

In voluntarily participating in (Insert activity name)..... on (Insert date of event) ...../...../....., an activity of this Club, I am aware that my participation in this activity may expose me to hazards and risks that could lead to injury, illness or death or to loss of or damage to my property. In particular when participating in abseiling or above the snowline activities I am aware that these activities expose me to the following additional hazards and risks. (Insert details)

.....

To minimise risks I will endeavour to ensure that:

1. Each activity is within my capabilities
2. I am carrying food, water and equipment appropriate for the activity
3. I will advise the activity leader of any physical or other limitation, or any medication I am taking or may need to take, or allergy that may require urgent attention during 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, and
6. I will comply with all reasonable instructions of club officers and the activity leader.

I have read and understand these requirements. I have considered the risks before choosing to sign this acknowledgement of risk. I still wish to join this activity. I accept that in signing this form I will take responsibility for my own actions and also acknowledge that I have been granted temporary membership of the above-named club for the duration of this event only.

Name	Address	Phone	Signature	Date

**Leader: Submit this form with other trip documentation to the President as a photo or pdf**

**EMAIL**      president@scb.org.au

**MOBILE**      0403 952 762