



# 1<sup>st</sup> Wave Surf School – Main Beach, Gold Coast

**Safe Surfing Program.** The safe surfing program covers not only the technical skills of surfing but areas such as first aid, oceanography and opportunities in the surfing industry to enable an ongoing involvement in a surfing lifestyle. The national certificate program, recognised and supported by the Australian Sports Commission is delivered by qualified Surfing Australia instructors. Soft surfboards, rash shirts and wetsuits (where necessary) are provided.

## PARTICIPANT DECLARATION

In consideration of the Surf School accepting my application to participate in the Program, ("Program" for the purposes of this declaration means and includes "Safe Surfing" lessons conducted **for students of the** ..... **School / College**) below I acknowledge, understand and agree that:

1. **"Surf School"** for the purposes of this declaration means and includes 1<sup>st</sup> Wave Surf School, Surfing Australia Inc ("SA"), SA affiliated state surfing associations, and their respective directors, officers, members, servants or agents.
2. **Warning:** Participating in the Program can be inherently dangerous. I understand the nature and requirements of the Program and acknowledge that serious accidents can and often do happen which may result in me being seriously injured or even killed. I have voluntarily read and understood this warning and accept and assume the inherent risks in participating in the Program.
3. **Physical Fitness:** I must not participate in the Program if I have any injury, disability, medical or health condition that may increase the risk of me becoming injured unless I have told the Surf School about it and they have authorised me to participate. I declare that I am medically and physically fit and able to participate in the Program and I will immediately notify the Surf School of any change to my fitness and ability to participate.
4. **Instructions:** I will at all times comply with the instructions and safety procedures of the Surf School.
5. **Medical Treatment:** If required, the Surf School will arrange medical or hospital treatment (including ambulance transportation) for me. I authorise such actions being taken by the Surf School and agree to meet all costs associated with such action.
6. **Release & Indemnity:** My participation in the Program is entirely at my own risk and I agree to:
  - (a) release and forever discharge the Surf School from all liability and Claims that I may have or may have had but for this release arising from or in connection with my participation in the Program;
  - (b) indemnify and hold harmless the Surf School to the extent permitted by law in respect of any Claim by any person including but not only another participant in the Program arising as a result of or in connection with my participation in the Program.

In this clause 6 "**Claims**" means and includes any action, suit, proceeding, claim, demand, damage, penalty, cost or expense however arising (including negligence, trespass to the person or for breach of implied terms in the sale of services under section 74 of the *Trade Practices Act (1974)* Cth and equivalent provisions contained in State sale of goods or fair trading legislation).
7. **Identity:** Photographic and or visual images taken by the Surf School of my participation in the Program may be used for general promotion of the Organiser's activities.
8. **Privacy:** I understand that the information provided by me in this form is necessary for the operation of the Program. I acknowledge and agree that the information will only be used for the objects of the Surf School and to provide me with information pertaining to the Program. I understand that I will be able to access my information through the Surf School upon request. If the information is not provided I might not be permitted to participate in the Program.

I have read, understood, acknowledge and agree to the above declaration including the warning, release and indemnity.

**NAME:**..... **DATE OF BIRTH:** .....

**ADDRESS:** ..... **POST CODE:**.....

**E-MAIL ADDRESS:** ..... **MALE / FEMALE:** .....

**SURFER'S MEDICAL INFORMATION** (confidential) Please indicate any medical conditions that coaches should be aware of:  
.....  
.....

**Signed:**..... **Date**.....

Where the applicant is **under 18 years of age** this form must also be signed by the applicant's parent or legal guardian.

I, ..... am **the parent or guardian** of the applicant. I expressly agree to be responsible for the applicant's behaviour and agree to personally accept the conditions set out in this application and declaration including the provision by me of a release and indemnity in the terms set out above.

**Parent's Signature** (where applicant under 18 y.o.a) : ..... **Date:**.....

**Parent's Name** (where applicant under 18 y.o.a) : .....

