

WALKING FOOTBALL BRISBANE



INDEMNITY FORM

I, residing at
in the State of Queensland, agree to abide by all Walking Football rules and regulations as contained on the Walking Football Brisbane (WFB) website, and as from time to time, have been provided to me in writing by WFB.

I **CONFIRM** I am aware of the inherent risks (including injuries to knees, hips and muscles/ligaments, any of which may require surgery) associated when participating in walking football sport/competition involving mature age groups. I also acknowledge any costs incurred due to serious injury are to be at my expense whether over and above any benefits applicable by private health insurance or not.

I **AGREE** I am fully responsible for my own fitness and physical health and have made an informed decision as to my ability and capacity to participate in the sport and/or competition.

I **ACKNOWLEDGE** WFB has recommended I obtain a medical health check-up to ascertain I will not be placing myself at risk by participating in this sport/competition. In addition to the advice regarding medical clearance, I have been advised by WFB of the benefits of obtaining income protection insurance to provide cover in the unfortunate event of serious injury, not likely to be covered by the public liability policy associated with North-Side Indoor Sports & Fitness, Brisbane City Indoor Sports Centre, and Walking Football Brisbane. I understand the choice to seek medical advice and arrange income protection insurance is solely my choice and responsibility.

I **AGREE** to be solely responsible for ascertaining whether any playing surface or any playing conditions meet my total satisfaction prior to participating in the sport/competition at any venue. I acknowledge and understand WFB will, prior to any game proceeding, inspect the playing venue for safety and suitability. Further, I accept it is my decision to go ahead and participate in the sport/competition and therefore release WFB and any other player of any liability for any injury or event sustained by me during the normal, play to rule, course of the sport/competition.

I **UNDERSTAND** and **AGREE** to comply with the sport's **no swearing** and **no aggression or violence** policy and to act as directed by the referee during the walking football periods of play.

I hereby absolutely and categorically indemnify and release the organising committee, team managers, WFB, and all other players complying with the rules and regulations of the sport/competition and Club Rules and Regulations from any conceivable liability, injury or even death or any other loss, injury or damage that I may, at any time, sustain. The basis of my participation in this sport/competition is based solely on me providing this indemnity to WFB.

I have completed my details and read the rules, indemnity information and hereby accept total liability for any injury or loss that may be incurred as a result of participating in the Walking Football sport/competition, indemnifying the organiser and WFB absolutely.

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Signature of Player

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Date