

**Agricultural Societies Council of New South Wales  
Incorporated Participants & Parental/Guardian Indemnity  
and Waiver  
RISK WARNING**

The Agricultural Societies Council of New South Wales advises that the participation, including passive participation in events or activities at an agricultural show contains elements of risk, both obvious and inherent, the risks involved may result in property damage and/or personal injury including death.

1. I the signatory acknowledge, agree and understand that participation, including passive participation, in events and activities at this, or any other show contains a risk of injury and I agree that I undertake any such risk voluntarily of my own free will and at my own risk.
2. I the signatory acknowledge, agree, and understand that the risk warning at the top of this form constitutes a “risk warning” for the purposes of Division 5 of the Civil Liability Act of 2002(NSW).
3. I the signatory acknowledge the risk referred to above and agree to waive any and all rights that I, or any person claiming through me, may have against the Hawkesbury District Agricultural Association in relation to any loss or injury (including death) that is suffered by me as a result of my participation in any event held by the Show.
4. The signatory must continually indemnify the Hawkesbury District Agricultural Association on a full indemnity basis against any claim or proceeding that is made, threatened or commenced and any liability, loss(including consequential loss or loss of profits), damages or expense (including legal costs on a full indemnity basis) that the Hawkesbury District Agricultural Association incurs or suffers, as a direct or indirect result of result of the participants participation in any event held by the Hawkesbury District Agricultural Association.

I have read this Indemnity and Waiver form and acknowledge and agree with its contents. I have made any further enquiries which I feel are necessary or desirable and fully understand the risks involved with this activity.

Name.....

Address.....

Signature.....Date.....

**To be completed by the Parent/Guardian of children under 18 years of age.**

5. I understand that by participating in this Show ..... (name of minor) may become exposed to the risk of injury, and I consent to the participation.

6. The signatory acknowledge the risk referred to above and agree to waive any and all rights that I, the above-named minor, or any person claiming through me, may have against the Hawkesbury District Agricultural Association in relation to any loss or injury (including death) that is suffered by me as a result of my participation in any event held by the Show.

1. I, the signatory assent that the above-named minor voluntarily consents to participation in this Show.

I have read this Indemnity and Waiver form and acknowledge and agree with its contents. I have made any further enquiries which I feel are necessary or desirable and fully understand the risks involved with this activity.

I,.....am the parent/guardian of ..... Date of birth.....

Name.....

Address.....

Signature.....