



Southern Boulder
1870 Brookman Rd, Hope Forest, 5172
SouthernBoulder.com.au

At Southern Boulder / Magpie Springs

Participant Name:

- 1- There are risks involved in these activities. All people taking part do so knowing that they are responsible for their own safety and are to be considerate of the safety of others.
- 2 - You are not allowed to take part in any activities under the influence of drugs, alcohol or under any circumstance that may impede judgment
- 3 – All activities are to be only undertaken if you are feeling safe to do so
- 5 -Patrons of amusement rides or devices have a duty to demonstrate that their action did not contribute to any incident in which they may have been involved if they make any claim against.
- 6 - Patrons have a duty to obey all reasonable instructions and warnings, including this one given
- 7 - The supervisor of this activity has a responsibility under the relevant regulations to exclude any person that they believe, for any reason, may be at risk or may put any patron at risk. Any direction given by the supervisor must be obeyed immediately.
- 9 – I have read and understand the rules involved in taking part in all activities
- 10 - Southern Boulder/Magpie Springs reserves the right to ask you to leave if there is any ongoing inappropriate behaviour
- 11 – Any damage to property as a result of your actions will be your responsibility to replace
- 12- Remember you are on private property and are expected to respect the grounds
- 13- Photographs / Video may be taken on site and used for promotional material

By signing below, I assume any risk of harm or injury, which might occur to the participant due to his/her/my participation in the event or activity. I release the organization or business named above from all liability, costs and damages, which might arise from participation in the above named event or activity.

If the participant is a minor, I agree that the minor has my consent to participate in the event. I further provide my consent for the organization or business named above to seek emergency treatment for the minor if necessary. I agree to accept financial responsibility for the costs related to this emergency treatment.

All rules are to ensure the safety of patrons and the on going enjoyment of the property.

Sign Here if Participant is an Adult - You are responsible for your own safety

Signature of Participant: Date :.....
Contact Number:

Emergency contact Name.....
Contact Number.....
Date:

**Sign Here if Participant is a Child -
You are responsible for the supervision, safety and behaviour of your children**

Name of Parent or Guardian:
Signature of Parent or Guardian: