

The Gladstone Region Regional Arts Development Fund (RADF) is a Queensland Government and Gladstone Regional Council partnership to support local arts and culture in regional Queenslane PO Box 29, Gladstone, QLD, 4680 Phone: 07 4976 6766 Fax: 07 4972 9097

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INDEMNITY RELEASE

Gladstone Region Regional Arts Development Fund (RADF) September 2018 Arts Business Workshops with Flying Arts Alliance Inc.

(Please select which workshop you will be attending)

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	Thursday, 20 September 2018, Miriam Vale Community Centre
	Friday, 21 September 2018, Calliope Regional Library
	Saturday, 22 September 2018, Gladstone Regional Art Gallery & Museum
	Warning: Risks Associated with Workshop Activity
1.	The Gladstone Region RADF Workshops program ("Program") is not considered dangerous. Nevertheless, as with any recreational activity nobody can guarantee that it is free of any risk of injury or damage, direct or consequential.
2. a) b)	Disclaimer Neither Gladstone Regional Council nor its representatives accept responsibility at law for the safety, health or security of: Participants or persons attending the program, or property in their possession or under their control; Persons who might be consequentially affected if a participant or a person attending the Program suffers injury or damage, e.g. Dependant.
3. 4. 5. 6.	Voluntary Assumption of Risk I have read, and I understand, the above warning and disclaimer. I understand that neither attendance at, or participation in the Program is free of risk. Despite any risks, I voluntarily consent to the participant attending and participating in the Program. I voluntarily accept all risks of attending or participating in the Program, and all risks of injury and damage that may be suffered as a direct of indirect consequence of attending or participating in the Program.
7. a) b) c) d)	Release and Indemnity I give the following release and indemnity in return for Gladstone Regional Council: allowing me to attend or participate in the Program; allowing the Participant to attend or participate in the Program; and in return for the representatives: assisting me while I attend or participate in the Program; and assisting the participant at my request (hereby made) while he/she attends or participates in the Program.
8. a) b)	I release Gladstone Regional Council and each of its representatives from responsibility or liability to me for injury and damage, that sustain, directly or indirectly: when or as a consequence of attending at or participating in the Program; as a consequence of the participant suffering injury or damage when or in consequence of attending or participating in the Program irrespective of how the injury or damage occurs.
9. a) b)	I undertake to indemnify Gladstone Regional Council and each of its Representatives against all loss and expense incurred through bein held liable to the participant, to me, or to any dependant of the participant or of mine, because of: Injury or damage, that I suffer, or that is suffered by any person in my care, custody or control; Damage to property in my possession or in the possession of any person in my care, custody or control, where the injury or damage, results directly or indirectly from: my attendance or participation in the Program; the Participant attending or participating in the Program.
10. a) b) c)	In this document: "Damage" means damage or loss; "Dependant" means a parent, guardian, spouse or dependant; "Injury" means illness, injury, adverse physical reaction, or death; "Participant" means the person intending to participate in the Program;
(Pleas	"Representative" means employee, contractor, and voluntary assistant. TICIPANT NAME:se print) NATURE: DATE:

(Parent or guardian must sign if participant is under 18 years of age)

Participants Medical Information

Are there any medical sensitivities (ie. allergies, religious beliefs etc.) that would in YES/NO. If yes, please list:	npact on any potential medical treatment?
Please list any past or present illnesses or conditions and medications, which may	affect ability to participate in the Program:
Photographic Release	
I hereby give Gladstone Regional Council, its employees, and those acting with it copyright, use, and/or publish photographs and/or video of the participant in procatalogues, magazines, newspaper articles, brochures, Council's Internet Web site	omotional materials, which include videos,
I hereby waive any right to inspect or approve the finished videos, photographs, a be used in conjunction therewith or to the eventual use that might be applied. release and authorisation, before affixing my signature below, and warrant that I fully	I have read the foregoing photographic
SIGNATURE: DATE: DATE:	
Participant's Name:	Age (if under18):
Address:	
Phone: Mobile:	
Email:	
Emergency contact:Phone:	
How did you hear about the workshops?	
Newspaper Flyer Word of mouth Website Fac	cebook other:
Would you like to receive information about future workshops at the address a	bove? Yes No
Join the Gladstone Regional Art Gallery & Museum mailing list at: http://gragm	ı.qld.gov.au

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A community cultural initiative of the Gladstone Regional Council

The Gladstone Regional Council is collecting the personal information to process your participation in the Gallery/ Museum Workshop program. The information will be only accessed by authorised employees within the Council. Your information will not be given to any other person or agency unless you have given us permission, or we are required by law.