



## **PASS ME THE BATON CIRCUS WORKSHOPS GENERAL TERMS & CONDITIONS**

• Under no circumstances can a participant train, perform, work or volunteer in any activities at Shoalhaven Entertainment Centre under the influence of alcohol or recreational drugs. If you (or your child/children) are taking prescribed medication for a particular condition, please consult your doctor about the effects this medication might have on your ability to train and perform safely.

### **INDEMNITY**

• I hereby agree to indemnify Shoalhaven Entertainment Centre, Livewire and Circa, and its directors, officers, employees, contractors and agents against all costs incurred, expenses and all liabilities whatsoever arising as a result of my actions, or trainer instructions, during all activities undertaken in Pass Me the Baton.

• I hereby agree that I (or my child/children) must follow safety instructions and guidelines for using Livewire and Circa's equipment as Livewire and Circa do not accept liability for personal injury. I understand that Livewire and Circa strive to ensure that a high level of safety is maintained at all times.

• I hereby declare that in training, performing and/or participating with Livewire and Circa, that I fully understand the nature of the activities that I (or my child/children) will participate in.

• I authorise Shoalhaven Entertainment Centre, Livewire and Circa to seek appropriate medical attention in the event that I (or my child/children) am injured. I also agree to pay all medical and ambulance costs which may be incurred by me or by anyone else as a result of my actions while participating in the activities of Livewire and Circa.

• I understand that the classes may be filmed, photographed or documented in some way by Shoalhaven Entertainment Centre, Livewire and Circa, and release these organisations to use my or my child/children's images in their advertising, archiving, publicity and marketing, and other related activities.

I agree to indemnify and release Shoalhaven Entertainment Centre, Livewire and Circa from 22/01/2018 to 5/02/2018, inclusive.

Participant Name:

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Parent/Guardian Names (must be over 18):

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Parent/Guardian Signature:

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Emergency Contact Name and Number:

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Please list any medical conditions that Livewire and Circa should be aware of:

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Your Doctor's Name and Practice Name:

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Your Dentist's Name and Practice Name:

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Please complete and return the signed document to Shoalhaven Entertainment Centre, located on Bridge Rd, Nowra, or to the Trainer at your workshop. Class participation cannot occur until we have received this document back.