



INDEMNITY FORM

**Sailability NSW Inc.
Toronto Branch**

Email: sailabilitytorontosecretary@gmail.com

This form must be filled in and signed by, or legally on behalf of, every person participating in the activities of Sailability NSW Inc Toronto Branch, before commencing such activity.

I/we have read and agree to follow the conditions of entry to the Toronto Waterfront Reserve and Toronto Amateur Sailing Club Inc, Sailability annexe and jetty. Water and sailing activities and games can have inherent risk and are undertaken at my/our risk.

While every care will be exercised by those in charge of these activities, I/we indemnify Sailability NSW Inc. (and its Toronto Branch), Toronto Amateur Sailing Club Inc., Lake Macquarie City Council and their officers, members, servants and agents to the extent to which they are not indemnified under any policy of insurance, from and against all actions, suits, damages, claims and demands arising out of any accident, injury or illness, to me/us during or as a result of participation in any activity or function connected with them.

I/we further authorise any officer, member, servant or agent of the organisations, if there is an accident, injury or illness, to obtain medical assistance or treatment for me/us, as he or she may consider necessary.

(Please print clearly in block letters)

Family Name:

Given name: Date of Birth:

Address: Postcode:

E-Mail: Phone: Mobile:

(This section to be filled in by the Carer, School or Group Home, where applicable)

Group Name (If applicable):

Parent / Guardian / Carer Name:
.....

Address: Postcode:

E-Mail: Phone: Mobile:

(This section to be signed by the client sailor / guardian / carer, volunteer or visitor)

I have read and understand the above

Signature: Date:
(Print) (Signature)

Please indicate whether: Volunteer Client Sailor Parent, Carer or Guardian Visitor

Please return completed form on a sailing day or email it to sailabilitytorontosecretary@gmail.com

No. Processed By: