

WHEN:

7.30am to 8.00am (Approx. 3km) followed by our Australia Day Breakfast and Awards Ceremony

WHERE:

Berri Riverfront (Adjacent to the Berri Visitor Centre)

WHO:

Anyone who wishes to celebrate our national day with family and friends

COST: Free

To assist with the smooth running of the morning proceedings, pre-registration for the walk would be appreciated. To register, please complete registration form on the other side.



Walker Contact Details				
Name		Age		
Phone Contact:	□ Mobile □ Work	□ Home (please tick)		
Residential Address	Town	State	Postcode	
		,		
Email Address				
☐ I do not wish to receive future emails from Berri Barmera Council about Community Events				
Emergency Contact:				
Name:	Telephone:	Relationship:		

MEDICAL CONDITIONS:

Please list any illnesses/ medical conditions (such as allergies) or medications that you believe we should be aware of in the event that you require medical attention.

INDEMNITY & WAIVER

Please ensure all participants/guardians read the information below before signing

I, whose signature appears below in consideration of and as a condition of acceptance of my entry in this event, for myself, my heirs, executors and administrators, hereby waive all and any claim, right or cause of action which I or they might otherwise have for or arising out of loss of my life or injury, damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon my entry or participation in - the said event.

I will abide by the Rules of the event, remain on the designated course and follow direction and decisions of the event coordinators and volunteers. Children under the age of 12 years of age are the responsibility of their parent/guardian and need to be accompanied at all times before, during and after this event.

This waiver, release and discharge shall be and operate separately in favour of the Berri Barmera Council, and all persons, corporations and bodies involved or otherwise engaged in promotion or staging the event and the servants, agents, representatives and officers of any of them.

I recognise the physical risks associated with this event and declare that I am physically fit to compete safely in this event, and that I have not been advised otherwise by a qualified medical person. I have listed above any existing illness, injury, allergy or medical condition, as well as any medications that I am currently taking that may affect my participation in this event.

I hereby acknowledge that I have sole responsibility for my personal possessions during the event and related activities.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during the event and acknowledge that I will be wholly responsible for any associated costs including ambulance fees.

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I hereby acknowledge that I have disclosed all information requested on the entry form.		Please return this form to: Berri Barmera Council
Signature	Date	(Berri Administration Office or Barmera Library) PO Box 229, Berri SA 5343
Name	_ for guardian/parent (if under 16 years of age)	jwishart@bbc.sa.gov.au By Friday 19 January 2024