



2017 Arboriculture Australia Ltd Tree Climbing Event to be held in Canberra April 28<sup>th</sup> and 29<sup>th</sup> 2017

WILD CARD - Competitor/Climber Entry Form and Waiver

This form MUST be completed and submitted with your payment before 12:00pm Friday 21<sup>st</sup> April 2017
Mail applications to Arboriculture Australia™ Administration, PO Box 80 MARLESTON SA 5033
P: 1300 664 374 E: enquiries@arboriculture.org.au

Form with fields: Name, Date of Birth, Organisation, Residential Address, State, Post Code, Telephone, Mobile, E-mail, TCC Fee/s, Member of Arb. Aus. Yes/No, State Representing, Entry Fee, Method of Payment.

Paying by credit card section with fields: Name on Card, Expiry Date, Signature, and card type options (VISA, MASTER, BANK CARD).

Please provide a brief description of competition experience, past ranking/s and current employment.

Three horizontal dotted lines for providing competition experience details.

Waiver and Hold-Harmless by Competitor/Climber.

In consideration of acceptance of my application for entry as a contestant in the Arboriculture Australia Ltd Tree Climbing Event:

- I hereby waive any and all claims that I may have at any time, and any and all claims which might otherwise be made by and/or on behalf of me, or by any person or entity in any way as my subrogates against or Arboriculture Australia™; arising on account of, and/or in consequence of my activities and/or participation in the Tree Climbing Event and
I recognise and assume all risks and responsibilities involved in my participation in the Tree Climbing Event, and will not under any circumstances rely upon the care, attention, or assurance of anyone other than myself for matters relating to my personal safety, and
I solemnly declare that I am an Australian Citizen and/or hold Australian Permanent Residency, as of the time this form was completed, and
I solemnly declare that all details as stated on this form (including my 'Residential Address'), are accurate as of the time this form was completed and submitted.

Competitor/Climber Signature:

Dated:

Waiver and Hold-Harmless by Employer of Contestant

- I hereby certify that I am the employer and/or the duly authorised representative of the employer, of the above-named competitor planning to participate in the Tree Climbing Event, and that the employer has encouraged this participation, and
The employer hereby waives any and all subrogation claims it may have against Arboriculture Australia™, its officers, directors, employees, agents, members, guests, or invitees, as a result of any compensation or other benefits or expenses incurred or paid by it, its insurance carrier, or otherwise on its behalf, in event any claim or injury resulting from this participation in the Tree Climbing Event, and
I further certify that I am duly authorised to execute this 'Waiver' on behalf of the employer and that any and all necessary resolutions have been duly passed and adopted by the employer.

The exact name and address of the employer, and state of incorporation is required:

Horizontal dotted line for employer name and address.

Employer/Duly Authorised Representative Signature:

Dated: