

Acknowledgement of risk acceptance form to participate in BOONIES Obstacle Course

Please read this form carefully and only complete it should you wish to be bound by its terms

Date of party:		
Name of participant:		
DOB:		
Address:		
Name of Emergency Contact:		
Emergency Contact No.:		
Please state any known health problems:		

Acceptance of Risk

I understand that participation in activities with BOONIES involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I accept that BOONIES Obstacle Course is a physical activity which has inherent risks associated with it these include but are not limited to: tree roots sharp objects, holes, burrows, trip hazards, barricades, raised platforms, walkways, mud, loose /soil /grounding, stagnant water, insect activity etc., while BOONIES take precautions to minimise the risk of injury occurring, I accept the risk by signing this form that the possibility of injury exists and that BOONIES accepts no responsibility unless legal liable for any loss or injury resulting from a participants involvement in BOONIES activities that were not reasonably foreseeable on the date of attendance by BOONIES Staff or Volunteers. Furthermore, it is understood and agreed that individuals participate at their own risk.

For participants under the age of 16 years old a parent / guardian is required to accept the associated risks on their behalf and sign this form.

I also understand that participation in these activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct (including all reasonable requests of marshalling staff and taking care of the equipment loaned). I also accept that the division of participants into teams is at the discretion of BOONIES staff.

We recommend that participants wear appropriate footwear which provides ankle support and that old clothes are worn as the risk of damage to clothing exists and BOONIES cannot be held responsible for damage to clothing or footwear.

(Please see the disclaimer overleaf)

BOONIES

- I understand that all activities undertaken at BOONIES Betteshanger Park are physically and mentally challenging and there is risk involved. This includes but is not limited to water based and other obstacles, surface, trip, slip and eye hazards, and a risk of falling from height.
- Although the BOONIES training facilities has strict safety standards and is risk assessed, the risk of serious injury or death cannot be totally eliminated. Therefore, I understand that participation in activities and the use of facilities at BOONIES is at my own risk. Furthermore, I understand it is my responsibility to only attempt an obstacle if it's safe to do so and is within my capabilities.
- I am fit and well and not on any medication that would impede me taking part in the activity. If I am I have sought medical advice from my doctor before taking part and made BOONIES aware.
- I will comply with all instructions given to me by the instructors, organisers, employees, and volunteers of BOONIES. I will use all equipment correctly and as directed so as not to hurt or injure anyone.
- I understand that BOONIES reserves the right to cancel or modify any activity or booking if BOONIES feels such conditions would otherwise create an unsafe environment.
- I agree that BOONIES are not responsible for any personal items or property that is lost or stolen at BOONIES unless legally liable.
- I understand that BOONIES takes no liability or responsibility for any mistakes, errors or inaccuracies made by participants where full instruction has been previously provided unless BOONIES are legally liable
- Parents / Guardians: If you wish to bring additional guests i.e., family members, colleagues, or children along to watch the activity it is hereby agreed that you will be fully responsible for their care and supervision at all times. If they have not paid to participate within the activity, they are not to use any of the obstacles or trails.
- In the event of an emergency, I understand that every effort will be made to contact the individual listed as the emergency contact person. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the instructor in charge to secure proper treatment, including hospitalization, anaesthesia, surgery, or injections to administer medication to me.
- I release BOONIES, the landowner, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation unless legally liable.

Statement and release

I Accept the risks associated as described and am happy to participate in BOONIES Obstacle Course / activities or I sign on behalf of my son / daughter / child in my care to take part.

Name:	
Signature:	
Date:	