

**PAWS – RACE FOR SURVIVAL**

**REGISTRATION AND INDEMNITY**

**INDIVIDUAL PARTICIPANT TO COMPLETE INDEMNITY/REGISTRATION/FAMILY CAN COMPLETE ONE FORM.**

**I, the undersigned, do hereby,**

1. **Acknowledge and declare that I enter COB BAY facility/associated areas and take part in the PAWS-RACE FOR SURVIVAL, fully aware of the danger and risk inherent in the presence of wild and dangerous animals, reptiles birds and insects.**
2. **Acknowledge that arising from the presence of wild and dangerous animals, reptiles birds and insects present in and associated with game reserves and game lodges. I appreciate that there is a danger at risk of suffering bodily harm, injury and death and/or loss of property. Such risk may arise as a result of an encounter with and/or the presence of such animals and/or reptiles and/or birds while present at COB BAY, and taking part in the PAWS-RACE FOR SURVIVAL.**
3. **On behalf of myself, my spouse, my common law wife/husband, my children whether minor or adult, and dependants, relative or relatives and/or person accompanying me COB BAY facility/associated areas, and/or taking part in the PAWS RACE FOR SURVIVAL, waive and abandon all claims of whatsoever cause or nature and howsoever arising against COB BAY OWNERS and/or the organisers of the PAWS-RACE FOR SURVIVAL, as the owner/organiser, their associates, servants, employees, directors, shareholders, and/or any other person connected , whether directly or indirectly, with the operation of COB BAY and/or the organisers of the PAWS-RACE FOR SURVIVAL and whether arising from an act or commission or omission on the part of those hereby indemnified or any of them.**
4. **Indemnify and hold harmless COB BAY OWNERS and/or the organisers of the PAWS-RACE FOR SURVIVAL as the operator/owner /organiser, it’s associates, servants, employees, directors, shareholders, and/or any other person connected , whether directly or indirectly, with the operation of COB BAY and fellow participants/guests and invitees from any and all claims of whatsoever nature which may arise on behalf of myself, my spouse, my common law wife/husband, my children whether minor or adult, and dependants, relative or relatives and/or person accompanying me to COB BAY facility/associated areas, and/or taking part in the PAWS-RACE FOR SURVIVAL, whether an invitee or otherwise, who may suffer injury or loss whilst entering or exiting or participating in/spectating in the PAWS-RACE FOR SURVIVAL and whether arising from an act or commission or omission on the part of those hereby indemnified.**
5. **Acknowledge that any emergency medical treatment arranged for by COB BAY/PAWS shall be at the discretion of the owners of COB BAY/PAWS and without prejudice to their rights and without any admission of liability on their part.**
6. **Declare and warrant that I am authorized to make and give the afore going waiver of claims and indemnity.**
7. **Acknowledge that I have read and understand the aforegoing acknowledgement, waiver and indemnity, and that I fully understand the meaning and effect thereof and that I am bound thereby without limiting time.**

**Name……………………. ..Sign……………………….I.D. ………………………………………( Guardian to sign if entrant < 16yrs )**

 **<16yrs Y/N 7.5km Run 15km Run 20Km Cycle 42Km Cycle**

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Email:…………………………………………………………………………………………………………………………………………………………………..