Privacy Statement: Information provided here will be kept private and confidential within the confines of the Probus Club and shall only be used in the event of an emergency.



THE PROBUS CLUB OF MOSS VALE INC.

PO Box 456, Moss Vale, NSW 2577 www.probusmossvale.org.au probusmossvale@gmail.com

PARTICIPANT/PARTNER/VISITOR DECLARATION

At all our Meetings, Functions, Tours, Outings, and other Club activities the safety and health of all participants is of primary concern. The club therefore requires all participants, members and partners, to complete and update this form annually.

It is the responsibility of the participant to assess the state of their health and fitness before deciding to participate in any club function and the contact information requested in case an emergency arises where a family member or contact needs to be informed of a situation. Please fill out the following information for yourself, your partner or both and return it to the club secretary.

PARTICIPANT DECLARATION

All Members/visitors/guests of our Probus Club, when participating in our Meetings, Functions, Tours, Outings, and other Club related activities do so under the terms of this Members Declaration.

- a) I understand that I am the person who is fully responsible for the state of my health, and I undertake to do all that is necessary so as not to place other participants under stress or duress or to put them in danger because of the state of my health or my behaviour.
- b) I declare that to the best of my knowledge, I am fit enough to undertake Functions, Tours, Outings and other Club related activities and agree to advise the Club and/or the tour leader immediately should the state of my health change.
 - c) I hereby declare that I will only participate in activities where I am physically capable.
 - d) I will update this declaration should any changes in my health or fitness status occur.
- e) I am aware that photographs may be taken during Functions, Outings and Tours and my image maybe included in such photographs. It is with my full knowledge and approval that these photographs may be published in the club newsletter, website and other publications.
 - f) In case of any accident, illness or emergency, please contact those nominated.
- g) I acknowledge, when applying to participate in club functions Outings/Tours and other Club activities that I accept the above terms of the Probus Club "PARTICIPANT DECLARATION".

In case of illness or an emergency please contact my partner or the alternate contact – (Note: Where a partner is attending an organised club event the initial contact attempted will be the member himself.)

MEMBER ONLY	PARTNER ONLY
Name	Name
Phone	Phone
Mobile	Mobile
Or if the above person is unavailable, please contact -	
Name	
Phone	Mobile
Signed(Member)	Signed(Partner)
Date	Date