

# Individual Registration Form

## ACTIVITY DETAILS

Activity Name:  Location of activity:

Date:  Time:

Is this your first time attending this particular activity?  Yes  No

## PARTICIPANT INFORMATION

Full Name  Date of Birth:

Male  Female  Other:

Are you of Aboriginal or Torres Strait Islander origin?  Yes  No

## MAIN CONTACT INFORMATION

Street Address:  Suburb:  Post Code:

Phone:  Email:

Please tick if you would like to be added to a mailing list to receive information on upcoming Council programs in the City of Logan

## EMERGENCY CONTACT

Contact Name:  Relationship:

Email:  Phone:

## How did you hear about the program? (Please tick as many options as required)

- Printed A&H booklet  Digital A&H booklet  Our Logan Magazine  Friend or Family member  Council's website
- Internet search  Social Media  Shopping Centre  Other

## TERMS AND CONDITIONS

By signing this document, I:

- a) understand that participating in any Active and Healthy activity is at my own risk and acknowledge and accept the level of risk consequent with the activity and in accordance with the rules specified by the Active and Healthy provider.
- b) hereby agree to indemnify and keep indemnified and hold harmless Logan City Council ("LCC"), its employees and servants, the promoter, partners, managers, officers, agents, contractors, any club, organisation and volunteers including medical and paramedical personnel appointed for the activities, the owners' licensees and occupiers of land in which the activities or any part of it are conducted, sponsors and activities organisers ("the parties") from and against all liability for any damage, loss, costs, expense, liability, claims, demands, actions, proceedings, injury (including death) or dispute including any negligence by the parties arising out of, directly or indirectly, the actions or omissions (whether wilful, negligent or otherwise) by the parties which may be brought by or on behalf of me or a child under my guardianship however arising out of or in relation to participation in the Active and Healthy program. To be clear, this waiver includes but is not limited to liability for any negligent or tortuous act or omission, breach of duty, breach of contract or breach of statutory duty on the part of the parties.
- c) acknowledge that I have voluntarily chosen to participate in the Active and Healthy program.
- d) acknowledge that there is a risk of COVID-19 transmission while participating in this activity.

- e) acknowledge I am fit, healthy, not suffering from any injuries and if appropriate, have a clearance from my doctor to participate in the Active and Healthy program or if I have an injury I have advised the provider of my injuries and have been cleared to participate.
- f) give full consent for LCC to use my images and/or personal information in any or all promotional and marketing campaigns, e.g. television and cinema advertising, promotional DVDs, and any other printed and or audio-visual or website material relating to LCC and the Active and Healthy program or other government agencies at the discretion of LCC.

### **I HAVE READ, UNDERSTOOD AND PROVIDE THE ABOVE RELEASE, WAIVER AND CONSENT**

#### **I acknowledge that:**

- a) I am eighteen years of age or over, or if I am under eighteen years of age my parent or guardian is also required to read and sign this document and;
- b) that my signature to this document constitutes a complete and unconditional release of all liability of the LCC to the extent permitted by law in the event of me and/or the children under my care suffering injury, death or permanent disability.

Parent/Guardian Name

Signature:

Date:

## LOGAN CITY COUNCIL PRIVACY COLLECTION NOTICE

Logan City Council is collecting your personal information for the purposes of the performance of its functions and providing services to the community. Your personal information may be accessed by employees, contractors, and/or Councillors of Logan City Council, and other Government agencies. Your personal information will be handled in accordance with the Information Privacy Act 2009 (Qld) and may be released to other parties where Logan City Council is required or authorised by law to do so. Due to COVID-19, your personal details may be passed onto the relevant health authorities to assist us with preventing the spread of the virus. If you withhold your personal information, you will not be permitted to participate in an Active and Healthy Program activity. We will use or disclose your personal information to enable contact tracing by health officials, upon request. For more information on Council's Privacy Policy and Procedures, visit [logan.qld.gov.au/privacy](http://logan.qld.gov.au/privacy).

Logan City Council – Active and Healthy Program

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[healthy@logan.qld.gov.au](mailto:healthy@logan.qld.gov.au)

[logan.qld.gov.au/healthy](http://logan.qld.gov.au/healthy)