

AGRICULTURAL SOCIETIES COUNCIL OF NEW SOUTH WALES LIMITED
CASTLE HILL ANNUAL SHOW
PARTICIPANT RISK ACKNOWLEDGMENT & WAIVER

Name of Participant

Address of Participant

Contact No. of Participant Email

Agricultural Societies Council of NSW Limited and the Castle Hill & Hills District Agricultural Society Inc ("the suppliers") advise that participation (including passive participation) in a completion or event at an agricultural show contained elements of risk, both obvious and inherent. Competitions, activities and events of all types are dangerous recreational activities.

1. By signing this waiver I acknowledge that:
 - 1.1. participation in animal handling is a recreational service for the purposes of section 139A of the Australian Competition and Consumer Act (Cth) 2010 and also a recreational activity for the purposes of section 5K of the Civil Liability Act (NSW) 2002;
 - 1.2. participation in the Event involves a significant risk of physical harm and may result in injury, loss, damage or death to me;
 - 1.3. participation in the Event requires certain skills and experience. I declare that I have sufficient skills and experience to be able to safely and properly participate in the events;
 - 1.4. If the event is held outdoors, there are risks to me as a result of the weather conditions, including either extreme hot or cold weather, rain or wind;
 - 1.5. I am responsible for ensuring that I have and will wear equipment suitable for safely and properly participating in the Event;
 - 1.6. I am responsible for the condition of any tools and equipment and ensuring that they are appropriate for the Event; and
 - 1.7. I use the facilities of Castle Hill & Hills District Agricultural Society Inc entirely at my own risk, as I find them and with the prior acceptance of the risk of possible danger to me.
2. If I suffer injury, loss or damage ("loss") while participating in the Event, I will not hold the suppliers, their employees or agents legally responsible for any loss I suffer. I will not sue the suppliers, their employees or agents for any claims, costs, damages or liability. I agree to release the suppliers and their employees from legal responsibility for the services I have been provided and/or activity I have participated in.
3. I acknowledge and agree that my participation in the event and associated activities is dangerous and may have inherent risks as a result of which personal injury (& sometimes death) may occur. I acknowledge that the event and associated activities carry with them a significant risk of physical harm. I accept and assume all such risks of personal injury or death in any way whatsoever arising from these activities and here waive my individual right to sue the suppliers for all claims I or my representatives may have for such personal injury or death against the suppliers in any way whatsoever arising from or in connection with these activities.
4. At the time of participating in the event, I have not been to any degree under the influence of alcohol or illicit drugs.
5. I will not consume any alcohol or illicit drugs while participating in the Event and agree that such use may result in me being excluded from the Event or other events with no entitlement to any refund or money paid for entry to the suppliers.
6. I agree to be bound by the rules and guidelines of the Agricultural Societies Council of NSW Inc as varied from time to time.

Where the participant is OVER 18 years of age.

1. I agree that I have read and understood this waiver prior to signing it and agree that this waiver will be binding on my heirs, next of kin, executors and administrators.
2. I acknowledge that the suppliers have permitted me to participate in the activity the subject of this document in reliance upon the matters acknowledged by me and the representations I have made herein.
3. I agree that this waiver shall be governed in all aspects by and interpreted in accordance with the laws of New South Wales.

Signature.....Date

Where participants are UNDER 18 years of age (to be completed by a parent or guardian)

I being a parent or legal guardian of the

above named participant, Date of Birthhereby consent to my child participating in the Castle Hill Annual Show.

I confirm that I have read and understood and explained to the participant, this waiver prior to signing it and agree that this agreement will be binding on my (and their) heirs, next of kin, executors and administrators.

I acknowledge that the suppliers have permitted the participant to participate in the activity the subject of this document in reliance upon the matters acknowledged by me and the representations I have made herein.

I agree that this waiver shall be governed in all respects by and interpreted in accordance with the laws of New South Wales.

Signature.....Date