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Gumdale QLD 4154
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qld.info@cycling.org.au

Official Race Entry Form

Name of Event		**Date of Event**	
Name		**Date of Birth**	
Contact Email		**Contact Phone**	
Licence no.	**Club**		
Division Masters/U15	**Grade- A, B, C, D** This will be confirmed by the state handicapper		
Credit card no. No American Express/Diners			
Name on C/Card		**Expiry**	/
Entry Fee	**$**		

WAIVER RELEASE & INDEMNIFICATION

In consideration of the acceptance of this entry in the competition by the Queensland Cyclist Association Inc hereafter called Q.C.A. and or its agents:

1. I hereby agree to comply with all the rules and regulations & event instructions of Q.C.A and their directors
2. For myself, my executors, administrators, heirs, next of kin, successors and assigns, I hereby (a) waive and release all claims I may have against Q.C.A their officer, directors, event committee, volunteers, employees, agents and sponsors, the State of Queensland, the local shire council or any one or more of them or their executors, administrators, heirs, next of kin, successors or assigns ('the release') including any and all claims for damages caused by the negligence of any of the above arising out of my participation in the event or it's related activities, together with any costs including attorney's fees that may be incurred as a result of such claim whether valid or not, and (b) indemnify and hold harmless the releases and each of them against any such claim that I or my guests or anyone or more of the executors, administrators, heirs, next of kin, successors and assigns may have or assert and against any costs including attorney's fees with respect there of.
3. I hereby acknowledge that I have sole responsibility for my personal possessions and sporting equipment during the competition and its related activities.
4. I hereby acknowledge that participation in the competition comes with it potential hazard. I therefore release the promoting club, CQ directors, events committees, members, volunteers, employees, sponsors of any liability resulting form injury or death during the event or it's related activities.
5. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during the competition.
6. Event photos taken by the Cycling QLD accredited photographer/s are made available for sale by that photographer/s remain the property of Cycling Queensland and may be used by Cycling Qld for promotional purposes, however, you may ***request in writing, prior to the event***, that images of you, your immediate family members or persons of legal responsibility are not published, either for sale or used as promotional purposes by Cycling Queensland

Signed: _____**by parent/guardian if under 18)**

Date: ____/_____/____