



**Society for Creative Anachronism Inc**  
**Request to Participate and Indemnity - Adult Non-member**

*For use within Australia only. Do not reduce this form. Please print clearly.*

Request to Participate and Indemnity

I, \_\_\_\_\_ (print full legal

name) of \_\_\_\_\_

(address) \_\_\_\_\_

not being a member of the Society for Creative Anachronism ("the Society"), request permission to be present and to participate in the event and activities detailed hereunder.

On being granted your permission I, for myself, my heirs and executors ACKNOWLEDGE AND AGREE:-

1. That I am fully aware of the nature of the activities to be engaged in and that they may be dangerous.
2. That I voluntarily accept the risks involved.
3. That I shall obey the proper directions of all authorised officials of the Society and that I may be excluded \_\_\_\_\_ from participating by my failure or refusal to do so.
4. That I shall indemnify and keep indemnified the Society and all members thereof whether officials or not \_\_\_\_\_ from and against all claims, actions, proceedings and demands of whatever kind relating to any injury, loss \_\_\_\_\_ or damage whatsoever and howsoever caused to my person or property, arising out of or in connection with \_\_\_\_\_ my participation in the activities.
5. That I understand the purport and effect of this document.

**Event:** \_\_\_\_\_

**Place:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Activity Permitted:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Witness:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Tick box if 18 years or older:**

AJS Feb 93



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**Place:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Activity Permitted:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Witness:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Tick box if 18 years or older:**

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**Request to Participate and Indemnity - Adult Member**

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**Request to Participate and Indemnity**

I, \_\_\_\_\_ (print full legal name)

of \_\_\_\_\_ (address)

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Event: \_\_\_\_\_

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Activity permitted: \_\_\_\_\_

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Tick box if 18 years or older ,**

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**Request to Participate and Indemnity**

I, \_\_\_\_\_ (print full legal name)

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Event: \_\_\_\_\_

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Activity permitted: \_\_\_\_\_

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Tick box if 18 years or older ,**

# SOCIETY FOR CREATIVE ANACHRONISM – AUSTRALIA MEMBERS' SITE INDEMNITY

Event: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Lists Official or Constable: \_\_\_\_\_ Date: \_\_\_\_\_

The following people have presented a signed valid Membership Card that indicates they have signed the "General Membership-Indemnity" statement on the membership form.

	Name	Card Number	Signature
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____
11	_____	_____	_____
12	_____	_____	_____
13	_____	_____	_____
14	_____	_____	_____
15	_____	_____	_____
16	_____	_____	_____
17	_____	_____	_____
18	_____	_____	_____
19	_____	_____	_____
20	_____	_____	_____
21	_____	_____	_____
22	_____	_____	_____
23	_____	_____	_____
24	_____	_____	_____
25	_____	_____	_____
26	_____	_____	_____
27	_____	_____	_____
28	_____	_____	_____
29	_____	_____	_____
30	_____	_____	_____
31	_____	_____	_____



Society for Creative Anachronism Inc
Request for Minor to Participate and Indemnity - Non Member

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Request to Participate and Indemnity

I, \_\_\_\_\_ (print full legal name of parent/guardian)

of \_\_\_\_\_ (address)

being the parent/legal guardian of \_\_\_\_\_ (print full legal name of minor)

("the minor") being a minor of the age of \_\_\_\_\_ years request permission for the minor to be present at and to participate in the event of the Society for Creative Anachronism Inc. ("the Society") detailed hereunder.

On being granted permission I, for myself, my heirs and executors ACKNOWLEDGE AND AGREE:-

- 1. That I am fully aware of the nature of the activities to be engaged in and that they may be dangerous to the minor.
2. That I voluntarily accept the risks involved.
3. That I alone shall be responsible at all times for the acts of the minor and shall obey the proper directions of all authorised officials of the Society and that I and the minor may be excluded by my failure or refusal to do so.
4. That I shall indemnify and keep indemnified the Society and all members thereof whether officials or not from and against all claims, actions, proceedings and demands of whatever kind relating to any injury, loss or damage whatsoever caused to the minor or his/her property, arising out of or in connection with his/her attendance or participation in the activity of the Society.
5. That I understand the purport and effect of this document.

Event: \_\_\_\_\_

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Activity Permitted: \_\_\_\_\_

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

AJS Feb 93



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Request for Minor to Participate and Indemnity - Non Member

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I, \_\_\_\_\_ (print full legal name of parent/guardian)

of \_\_\_\_\_ (address)

being the parent/legal guardian of \_\_\_\_\_ (print full legal name of minor)

("the minor") being a minor of the age of \_\_\_\_\_ years request permission for the minor to be present at and to participate in the event of the Society for Creative Anachronism Inc. ("the Society") detailed hereunder.

On being granted permission I, for myself, my heirs and executors ACKNOWLEDGE AND AGREE:-

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Event: \_\_\_\_\_

Place: \_\_\_\_\_ Date: \_\_\_\_\_

Activity Permitted: \_\_\_\_\_

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

AJS Feb 93