



Name:-							
Address:-							
Suburb / Town:-				Postcode:-			
Mobile:-			Email:-				
Special Dietary Needs:-							
Emergency Contact:-							
Contact's Mobile:-							
Please select option							
Options & Distances			Adult \$!	50	Senior \$40	Student \$10	
Yea to Merton	(return)	93	Km				
Merton to Yea	(return)	93	Km				
Merton to Cathkin	(return)	51	Km				
Yea to Cathkin	(return)	42	Km				
Yea to Alexandra	(return)	68	Km				
Alexandra to Yea	(return)	68	Km				
Alexandra to Cath	kin (return)	26	Km				
Under school age: free. Senior: Holder of Seniors Card							
Payment Details (Tick Box)  Credit/Debit card payment at trybooking.com/CMRGJ(Cycle Dindi 24)  Direct Deposit to Bendigo Bank BSB 633-000							
Account Number 161857420. Account Title: - Cycle Dindi							
Please reference payment with name and ride option.  Legistration by post to PO Box 149 Yea 3717 or email entry to: <a href="mailto:cycledindi24@gmail.com">cycledindi24@gmail.com</a>							
Photo Release Form I hereby grant permission to use photographs and/or videos of me taken during Cycle Dindi 2024 in publications, news releases, online and in other communications in promotion of the event by Cycle Dindi and its partners. A name entered into the box signifies consent.							
Signed							

## **General Release and Indemnity**

The	Rotary Clubs of	("Rotary")					
	(insert Rotary Club	o's Name)					
(Insert name of specific Rotary Function/Event)							
1.	I,	(insert name of Participant)					
	of	(insert Participant's Home Address)					
	In the State of	(insert State)					
	am aware and acknowledge that Cycinvolves inherent risks, including the risk of injury tundertaking such activities, I do so at my own risk.	<b>y</b> , , ,					
2.	I am also aware that it is a condition of participatio	n in					
	·	("Event")					
	howsoever arising from injury or damage to both or otherwise) arising out of my participation in the	and volunteers are released by me from all liability property and person howsoever caused (whether fatal e Event whether or not such injury or damage is due to for omission on the part of Rotary, its officers and					
3.	expenses (including legal costs on a solicitor and o	agents and volunteers against all loss, damage and own client basis) arising out of or in connection with any ind arising directly or indirectly as a consequence of my					
4.	I acknowledge and agree that my participation in the Event is as a consequence of my own free will and desire and that I have read and understood the above warning, release and indemnity.						
5.	I warrant that I am 18 years of age or older and am lawfully able to enter into this above release and indemnity or, in the event that I am a minor, I have the permission of my legal guardian to participate in the Event and that my legal guardian has agreed to adhere to the terms of the indemnity below.						
6.	A name entered into the box signifies consent	<u>.</u>					
Sigr	ned .	Dated					
Oigi							
	(Full Participant Name)	(insert date)					
To be completed only if the participant is a minor							
I,		(insert name of Parent / Legal Guardian )					
of		(insert Parent's/ Legal Guardian's home address)					
am th	ne legal guardian of	(insert name of Participant) ("Participant")					
and c	onsent to him/her participating in the Event.						
<ul> <li>I release Rotary, its officers and employees, agents and volunteers from all liability, howsoever arising, from injury or damage to both property and person howsoever caused (whether fatal or otherwise) arising out of the Participant's participation in the Event whether or not such injury or damage is due to any negligent act, breach of duty, default and/or omission on the part of Rotary, its officers and employees, agents or volunteers.</li> </ul>							
<ul> <li>I indemnify Rotary, its officers and employees, agents and volunteers against all loss, damage and expenses (including legal costs on a solicitor and own client basis) arising out of or in connection with any claims, actions, proceedings or demands of any kind arising directly or indirectly as a consequence of the Participant's participation in the Event. A name entered into the box signifies consent.</li> </ul>							
Sigr	ned (Full Parent / Legal Guardian Name)	Dated (insert date)					
	(. a a. a Logar Guardian Namo)	(55 22.5)					

Rotary (

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