

Indemnity Form

In seeking to participate in an outdoor activity with Sydney Outback, I accept that there is an element of risk involved in the activity, including, but not limited to:

1. Poisonous animals

The Australian bush is home to several species of poisonous animals such as ticks, snakes and spiders. Good footwear, long trousers and careful observation will help reduce the risk of a bite or sting but not eliminate it. ALL animals encountered should be left alone.

2. Treacherous terrain

The route traverses a variety of terrain, on marked and unmarked tracks, including steep sections, cliff tops, beaches, scrubland, bush and rainforest, all of which have inherent dangers of which there not always be protection in the form of fences, barriers or signed warnings. Stay two metres from cliff edges at all times.

3. Sunburn

With lengthy exposure to the sun the risk of burning is quite high, even on cloudy days. Follow Cancer Council NSW Guidelines at all times, which include wearing a hat and reapply sunscreen regularly.

4. Medical conditions

If you suffer from a medical condition, are pregnant or have recently had an operation or injury that may make it more likely to be involved in an incident which could result in harm, we recommend you do not participate in one of our activity tours. Please let your guide know of any medical conditions.

While Sydney Outback, and its guides, acknowledge a duty of care to all participants, and are insured for public liability, we strongly recommend taking out individual personal injury and ambulance insurance for the duration of the tour.

I, the undersigned, being aware of my own health and conditions including, but not limited to the above, voluntarily assume the risk inherent in taking part in such an activity and release Sydney Outback, and its employees from liability for accidental injury, illness or loss, which may incur as a result of participating in the said activity.

Name: _____

Address: _____

Email address: _____

Emergency contact name and number: _____

Signature: _____ Date: _____