

UMSU Inc (University of Melbourne Student Union) Clubs & Societies Participant Information Form



In an endeavour to provide for the safety of all persons associated and participating with Umsu Inc (UMSU) and affiliated Clubs, Associations and Societies please supply the following confidential information:

PLEASE PRINT CLEARLY

1. Participant name: _____ Student number: _____

University of Melbourne Student (circle): Y/N Course: _____

2. Date of Birth: ____/____/____ (Note: if the Participant is not 18 years or older a Guardian must sign this form)

Address: _____

3. Guardian (if the Participant is under 18 years of age): _____

Address: _____

4. Full name of your Club, Society or Association: _____

5. In case of an emergency contact: _____

Phone number: _____

6. Medicare/Private Health Insurance Number: _____ Australian/Other (Circle)

7. Medical disorders: _____

8. Special medication/treatment required: _____

9. Allergies: _____

10. Special meals required (e.g. vegetarian): _____

By signing this Participant Information Form the Participant elects to and the Guardian (if any) allows the Participant to participate in the Activities and in consideration for Umsu agreeing to allow the Participant to participate in the Activities the Participant and the Guardian (if any) agrees to be bound by the terms and conditions of the attached Indemnity:

Signed (Participant)

_____/_____/_____
Date

Signed (Parent/Guardian) ONLY if participant is UNDER 18 years

_____/_____/_____
Date

Signed (on behalf of Umsu)

_____/_____/_____
Date

Privacy Statement:

UMSU Inc endorses fair information handling practices. Any information provided on this form will only be used for the purpose of providing medical assistance to the individual concerned and will otherwise be kept confidential unless required to be disclosed by law. The information will only be retained whilst the Participant is reasonably likely to participate in future Activities or as required by law and will then be destroyed.

UMSU Inc (University of Melbourne Student Union) Participant Indemnity (“Indemnity”)

By signing the Participant Information Form, you enter into an agreement with Umsu Inc (“Umsu”) to permit the Participant to participate in Activities on the following terms and conditions:

1. I permit the Participant to participate in Activities and if required be accommodated for the purpose of the Activities.
2. I, release, indemnify and shall keep indemnified Umsu, the Club, their officers, agents, members, servants and employees in respect of all liability, actions, proceedings, suits, demands, claims and costs of every description which they or any one or more of them may incur or receive at law or otherwise, directly or indirectly relating to or arising from any accident, illness, injury, death or loss or damage to property suffered, sustained or incurred during, or as a direct or indirect consequence of participation in any Activities, by the Participant.
3. I authorise that, in the event of the Participant being involved in an accident or becoming ill, or otherwise injured or harmed in any way, Umsu, the Club and/or their officers, members, agents, servants and employees may, at their absolute discretion, obtain medical treatment for the Participant using the information provided on the Participant Information Form and I agree to pay all expenses incurred in obtaining such medical treatment.
4. I release, indemnify and shall keep indemnified Umsu, the Club, their officers, agents, members, servants and employees in respect of all liability, actions, proceedings, suits, demands, claims and costs of every description which they or any one or more of them may incur or receive at law or otherwise, directly or indirectly relating to or arising from any medical treatment pursuant to paragraph 3 of this Indemnity.
5. I understand the risks of the involvement of the Participant in the Activities and agree not to hold Umsu, the Club, their officers, agents, servants and employees liable for any event that may occur, whether that event occurs during any Activities.
6. I have been given an opportunity to seek independent legal advice regarding the contents of this document. I understand that if I do not seek independent legal advice, I will be taken to have understood that this document has legal effect and to have understood my rights and obligations and to have agreed with and accepted them.
7. I consent to the collection of the information on the Participant Information Form which is “personal information” and or “health information” under the Privacy Act 1988 for the purpose of the Activities and obtaining medical treatment for the Participant pursuant to paragraph 3 of this Indemnity.
8. I warrant that the information contained on the Participant Information Form is true and correct.
9. The following words have the following meanings for the purposes of this Indemnity:

Activities means activities, functions or meetings organised or arranged by Umsu and/or the Club from time to time.

Club means the club, association or society described at Item 4 of the Participant Information Form which is affiliated with Umsu Inc pursuant to Umsu rules regarding the affiliation of clubs, associations and societies.

“I” and “you” means the Participant and the Guardian jointly and severally.

Guardian means the person described at Item 3 of the Participant Information Form.

Participant means the person described at Item 1 of the Participant Information Form.

Participant Information Form means the document attached to this Indemnity which you have signed and which indicates your acceptance of the terms and conditions of this Indemnity.