



Number (Organiser use)

Gender

Male

Female

Surname

First Name

ID Number

Date of Birth (YYMMDD)

Cell Number

Email

Medical Aid

Medical Aid Number

Emergency Contact

Emergency Contact No

### INDEMNITY

In consideration of the acceptance of my entry, I, for myself, executors, heirs, administrators and assigns, do hereby release and discharge Merrell Adventure Addicts, the sponsors, all medical personnel, any and all authorities from all claims for injury, damage and property loss I may suffer caused by negligence of any of them and arriving out of my participation in the event including pre and post event activities. I am physically fit and sufficiently trained to participate in this event and assume all risks of participation. I accept all rules, conditions and regulations and agree that my name, photographs, video tape, broadcasts, telecasts, any advertising promotion may be utilized free of charge.

Name (Print)

Signature

Signature (Guardian if under 18)

Date

Email to [info@advaddicts.co.za](mailto:info@advaddicts.co.za) or fax to 086 614 1921

Entry fee of R1,000 will be payable to Adventure Addicts upon confirmation of registration.