GRAVITY SKATE & SCOOTER COMP
SUNDAY 22 SEPTEMBER 2013
AT GRAVITY SKATEPARK
LAKEHAVEN
10TO3
FREE ENTRY - SWEET PRIZES
REGISTRATION
9TO9:30
3 DIVISIONS
SKATE
SCOOTER
+ GIRL’S DIVISIONS
MUSIC BY GRAVITY DJS
GRAB AN ENTRY FROM SLAM FACTORY,
LAKE HAVEN SHOPPING CENTRE,
GRAVITY OR WYONG SHIRE COUNCIL
Enquires call Slam Factory on 4355 1557 or Lyn Cooper, Wyong Shire Council on 0408 161 347

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RITE DESIGNS
GRAVITY SKATE & SCOOTER COMPETITION by SLAM FACTORY – Comp Rego

Sunday 22/09/2013 - (9am – 930am registrations) - Competitions from 10am - 3pm,
Gravity Skate Park, Off Bannister Drive, Lake Haven

Name: ______________________________________ Birthday: _____________ Age: _____ M/F: _____
Address:_______________________________________ Mobile: __________________________

Register me for (please circle): Scooter / Skate

Division (please circle One):

[ ] 12 years and under
[ ] 13 - 15
[ ] 16+

If there are more than 3 girls entering there will be two girls divisions – 1 skate and 1 scooter

Competition times will be available on the day. All registrants must complete the Participant Declaration and Indemnity Form below to participate in the competition.

Participant Declaration and Indemnity Form

Must be completed by Parent/Guardian if participant under 18 years of age

I understand that skateboarding and scooter riding carries with it an element of risk that I/my child will be exposed to. I hereby acknowledge and accept all such risks associated with this event and indemnify SLAM Factory and it's officers against all claims, demands, actions and liability of any kind (other than due to wilful negligence) including breakages, loss or theft, in the course of my/my child's participating. I understand that all reasonable due care will be undertaken by SLAM Factory and understand and acknowledge that injury may result from skateboarding and scooter activities. Participants are required to wear a HELMET. Participants are encouraged to wear elbow and knee pads. Each participant has to bring their own.

I authorize SLAM Factory and Wyong Shire Council to take photographs of me/my child during this event and understand that these may be used for any promotional purposes.

In the event of any accident or illness, I authorize the obtaining on my behalf of such medical assistance as I/my child may require, and agree to meet my expenses attached hereto.

MEDICAL/PHYSICAL CONDITION

Does the participant have any allergies, disabilities or special condition that we should be aware or? If so, please state the details including personal doctor's name and phone number:

______________________________________________________________________________________________

Emergency Contact

Name: ............................................................... Number:......................................................

Medicare Number: ....................... Name on card: ...............................................................

Participant Signature (if 18years+)

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Parent/Guardian Signature (if under 18years):

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☐ I am happy to receive information about other events from Wyong Shire Council and SLAM Factory

Any questions call SLAM Factory on 4355 1557 or Lyn Cooper, Wyong Shire Council on 0408 161 347