

VENUE: _____

DATE: ____/____/_____



iRace
www.irace.net.au

MEDIA DISCLAIMER

EXCLUSION OF LIABILITY, RELEASE AND ASSUMPTION OF RISK

MEDIA ACCREDITATION

In exchange of being able to attend or participate in the event (and as a condition of this Accreditation), I agree:

- To release Independent Race Series (iRace), Marulan Driver Training Centre Pty Ltd (MDTC), promoters, sponsor organisations, land owners and lessees, organisers of the event, their respective servants, officials, representatives and agents (collectively, the “**Associated Entities**”) from all liability for my death, personal injury (including burns), psychological trauma, loss or damage (including property damage) (“**harm**”) howsoever arising from my participation in or attendance at the event, except to the extent prohibited by law;
- That iRace and the Associated Entities do not make any warranty, implied or express, that the event services will be provided with due care and skill or that any materials provided in connection with the services will be fit for the purpose for which they are supplied; and
- To attend or participate in the event at my own risk.

I acknowledge that:

- The risks associated with attending or participating in the event include the risk that I may suffer harm as a result of:
 - Motor vehicles (or parts of them) colliding with other motor vehicles, persons or property;
 - Acts of violence and other harmful acts (whether intentional or inadvertent) committed by persons attending or participating in the event; and
 - The failure or unsuitability of facilities (including grand-stands, fences and guard rails) to ensure the safety of persons or property at the event;
 - Motor sport is dangerous and that accidents causing harm can and do happen and may happen to me.

I accept the conditions of, and acknowledge the risks arising from, attending or participating in the event and being provided with the event services by iRace and the Associated Entities.

I understand that this disclaimer is not intended to exclude any valid claim I may have under the iRace Personal Insurance Scheme.

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Name (please print)

Organisation

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Signed

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Address Details

Contact Telephone Number:

Date:/...../.....