

SCOUTS AUSTRALIA, QUEENSLAND BRANCH INC.

ROVER INDEMNITY FORM

FORM: A20 ISSUE: 8 DATE: 06/07

TO BE COMPLETED BY ALL ROVERS UPON ATTAINING 18 YEARS OF AGE			
ROVER'S DETAILS			
NAME (✔ box) Mr	MEMBER NUMBER	Preferred Name	
Miss Ms Ms	FAMILY NAME	GIVEN NAMES	
Rover Crew			
INDEMNITY In consideration of the Scout Association of Australia – Queensland Branch Inc accepting me as a member and accepting me as a non-member partaker in an activity(s) I/we			
agree to release, indemnify and save harmless; and at all times hereafter to keep released, indemnified and saved harmless the indemnified persons (as defined in definition A) from and against all liability, claims, suits, demands or actions or whatsoever nature or description, including liability, claims, suits, demands or actions for negligence directly or indirectly arising out of or in relation to my attendance or conduct at, or travel to or from any Scouting Activity (as defined in definition B).			
I/we agree to be bound by the Constitution Rules and Regulations of the Scout Association of Australia – Queensland Branch Inc being those existing as at the time of acceptance of me as a member/or non-member participating in a scouting activity and thereafter as lawfully modified and amended or added to from time to time. I/we acknowledge that the intent of this Indemnity is that it may be pleaded in limitation of liability by the indemnified person with respect to any claim that may be brought.			
against the indemnified person.			
of me as a member of the	e acknowledge that the intent of this Indemnity is to benefit the indemnified person and agree for the purposes of Section 55 of the Property Law Act (Qld) that acceptance me as a member of the Scout Association of Australia – Queensland Branch Inc or as me as a non-member attending a scouting activity will constitute an acceptance by all Indemnified persons of the benefit conferred by this application for membership/non-member activity advice. Be authorise the Scout Association of Australia – Queensland Branch Inc and all other branches of the Scout Association of Australia in the event of accident or illness of self to obtain such medical assistance or treatment as may be necessary and for this purpose to engage any doctors nursing assistance or hospital accommodation or other cedures and in such an event I agree to pay for those expenses and if necessary reimburse the Scout Association of Australia – Queensland Branch Inc or any other necessary self-burse and in such an event I agree to pay for those expenses and if necessary reimburse the Scout Association of Australia – Queensland Branch Inc or any other necessary self-burse the Scout Association of Australia – Queensland Branch Inc or any other necessary self-burse that I may be exposed to risk of injury as a result of participating in scouting activities. Be acknowledge that if the Scouting Association of Australia-Queensland Branch Inc permits the applicant to partake in scouting activities such permission constitutes acknowledge that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satisfaction and I/we accept those terms. Be acknowledge that as a member of The Scout Association of Australia, Queensland Branch Inc. your child may participate in activities which may be photographed or led for publicity and archival purposes. This enables us to raise the profile of Scouting within the community.		
I/we authorise the Scout Association of Australia – Queensland Branch Inc and all other branches of the Scout Association of Australia in the event of accident or illness of myself to obtain such medical assistance or treatment as may be necessary and for this purpose to engage any doctors nursing assistance or hospital accommodation or other procedures and in such an event I agree to pay for those expenses and if necessary reimburse the Scout Association of Australia – Queensland Branch Inc or any other branch of the Scout Association of Australia for such expenses on demand.			
I/we acknowledge that as applicant I may be exposed to risk of injury as a result of participating in scouting activities.			
I/we acknowledge that if the Scouting Association of Australia-Queensland Branch Inc permits the applicant to partake in scouting activities such permission constitutes consideration for the above indemnity.			
I/we acknowledge that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satisfaction and I/we accept those terms.			
I/we acknowledge that as a member of The Scout Association of Australia, Queensland Branch Inc. your child may participate in activities which may be photographed or filmed for publicity and archival purposes. This enables us to raise the profile of Scouting within the community. Photographs, footage and information gathered may be used in The Scout Association of Australia, Queensland Branch Inc promotional material including but not restricted to: newsletters, annual reports, brochures, posters, videos, letters and website. The Scout Association of Australia, Queensland Branch Inc would be happy to send you copies of promotional material if requested. Information that may be used includes; child's first name, age, scouting rank, reasons for participating in scouting or scout related activity.			
CODE OF_CONDUCT			
For Adults in Scouting in Queensland			
		niformed, who work within the Movement, recognising that at a	
Adults in So	couting demonstrate a high degree of individual r		
 Adults in So Adults in S 	outing act at all times in accordance with Scouting couting do not use the Movement to promote		
		ment in all interpersonal relationships both inside and outsid	
Adults in So			
8. Adults in Separation Separatio	couting for their own protection, should avoid poat at least two adults are in attendance whilst sup-	stentially compromising situations by ensuring, where reasonable ervising and/or accompanying Youth Members.	
9. Adults in So	couting realise bullying, physical or verbal abuse		
	enter the intent of this Indemnity is to benefit the indemnified person and agree for the purposes of Section 55 of the Property Law Act (Old) that acceptance or of the Scout Association of Australia – Queensland Branch Inc or as me as a non-member attending a scouting activity will constitute an acceptance or of the Scout Association of Australia – Queensland Branch Inc and all other branches of the Scout Association of Australia in the event of accident or illness of uch medical assistance or treatment as may be necessary and for this purpose to engage any doctors nursing assistance or reatment as may be necessary and for this purpose to engage any doctors nursing assistance or reatment as may be necessary reinforces the Scout Association of Australia or such expenses and if necessary reinforces the Scout Association of Australia for such expenses on demand. It all as applicant I may be exposed to risk of injury as a result of participating in scouting activities. In that if the Scouting Association of Australia-Queensland Branch Inc permits the applicant to partake in scouting activities such permission constitutes the above indemnity. In that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satistation and I/we accept those terms. In that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satistation and I/we accept those terms. In that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satistation and I/we accept those terms. In that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satistation and I/we accept those terms. In that I have been given an opportunity to read and consider this indemnity and have read and considered it to my satistation and I/we accept those terms. It is that the intent of the Scouting Association of Australia, Ouersland Branch Inc promotion and I/		
I accept the Indemnity and agree to abide by the Associations Code of Conduct as written above.			
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Signature	Name	Date	

Forward direct to Queensland Scout Centre