



SURFING WESTERN AUSTRALIA

SURF SCHOOL INFORMATION

SUNSMART SAFE SURFING PROGRAM



**WEEKEND LEARN TO SURF COURSES
2010
\$120 PER PERSON**



INCLUDES:

- **EXPERT COACHING**
- **BOARD**
- **WETSUIT**
- **SUNSCREEN**
- All courses consist of 4 x 90 minute lessons
- Classes have a maximum of 8 students per coach
- Each participant is awarded a certificate upon completion of the course
- All coaches hold the Level 1 NCAS Surf riding Coaching Accreditation with the Australian Sports Commission and S.L.S.A Surf Rescue Certificate

LEARNING TO SURF

For the complete beginner, this level introduces you to:

- Surf safety and awareness
- Correct standing technique and general surfing knowledge
- Surf Etiquette
- SunSmart and Sport safe behaviour

Prerequisites – You must be at least 7 years of age, be able to swim 50 meters in deep water and tread water for 1 minute unaided. All participants must sign the waiver before the commencement of the lesson. If the participant is under 18, this must also be signed by a parent or legal guardian.

COURSE LOCATION

Classes are conducted at Trigg Beach all year round with exception to June, July and August where we could possibly move up to Mullaloo. Conditions at Mullaloo during these months have proved more suitable for beginners. In the December/ January School Holidays, courses are conducted at Trigg Beach.

HOW TO ENROL

1. Please complete ALL details of the enrolment form and sign the Participant Waiver.
2. Please send enrolments with payment to Surfing WA via the following:
POST TO: Surfing WA, PO Box 382, Karrinyup WA 6921 – Cheque, money order or credit card only;
FAX TO: 9447 0309 – Credit card payments only;
IN PERSON: Surfing WA, 360 West Coast Dr, Trigg Beach (Mon – Fri, 8am – 4pm) - All payment forms accepted.
PLEASE NOTE: Enrolments received without a payment **WILL NOT** be accepted.
3. For fax and postal enrolments, please phone 9448 0004 to confirm that your enrolment has been received.

COURSE CONDITIONS

A full refund is available for cancellations made up to the Friday prior to course commencement. **Missed lessons are forfeited unless a doctor's certificate is presented.** This lesson can made up at another time subject to availability.

Should any other conditions beyond our control force the cancellation of a lesson, a makeup lesson for participants will be arranged.

All courses consist of 4 x 90 minute lessons conducted on the dates specified. Days and times cannot be changed. If you miss a lesson for any reason other than illness, that lesson is forfeited – No exceptions.



SURFING WA ENROLMENT



SUNSMART SAFE SURFING PROGRAM

Participant Details and Waiver

In consideration of the Organisers accepting my application to participate in the Program, below I acknowledge, understand and agree that: **1. "Organisers"** for the purposes of this declaration means the Surfing Western Australia Surf School, and includes, where the context so permits, Surfing Australia Inc ("SA"), SA affiliated state surfing associations, and their respective directors, officers, members, servants or agents. **2. Warning:** Participating in the Safe Surfing program ("the Program") can be inherently dangerous. I acknowledge that I am exposed to certain risks during the Program including but not limited to physical hazards, unpredictable and sometimes dangerous surf and weather conditions and actions of other participants. I acknowledge that accidents can and often do happen which may result in me being injured or even killed, or my property being damaged. I have voluntarily read and understood this warning and accept and assume the inherent risks in participating in the Program. **3. Physical Fitness:** I must not participate in the Program if I have any injury, disability, medical or health condition that may increase the risk of me becoming injured unless I have told the Organisers about it and they have authorised me to participate. I declare that I am medically and physically fit and able to participate in the Program and I will immediately notify the Organisers of any change to my fitness and ability to participate. **4. Instructions:** I will at all times comply with the instructions and safety procedures of the Organisers. **5. Medical Treatment:** If required, the Organisers will arrange medical or hospital treatment (including ambulance transportation) for me. I authorise such actions being taken by the Organisers and agree to meet all costs associated with such action. **6. Exclusion of Implied Terms:** I acknowledge that where I am a consumer of recreational services, as defined by any relevant law, certain terms and rights usually implied into a contract for the supply of goods or services may be excluded. I acknowledge that these implied terms and rights and any liability of the Organisers (or any of them) flowing from them, are expressly excluded to the extent possible by law, by this declaration. To the extent of any liability arising, the liability of the Organisers will (at the discretion of the relevant Organiser) be limited to the resupply of the services or payment of the cost of having the services supplied again. **7. Release & Indemnity:** My participation in the Program is entirely at my own risk and I agree to the extent permitted by law to: **(A)** release and forever discharge the Organisers from all liability and Claims that I may have or may have had but for this release arising from or in connection with my participation in the Program; **(B)** indemnify and hold harmless the Organisers to the extent permitted by law in respect of any Claim by any person including but not only another participant in the Program arising as a result of or in connection with my participation in the Program. (In this clause 7 "Claims" means and includes any action, suit, proceeding, claim, demand, damage, cost or expense however arising including but not limited to negligence but does not include a claim against the Organisers under any right expressly conferred by their respective constitutions or regulations). **8. Identity:** Photographic and or visual images taken by the Organisers of my participation in the Program may be used for general promotion of the Organisers's activities. **9. Privacy:** I understand that the information provided by me in this form is necessary for the operation of the Program. I acknowledge and agree that the information will only be used for the objects of the Organisers and to provide me with information pertaining to the Program. I understand that I will be able to access my information through the Organisers upon request. If the information is not provided I might not be permitted to participate in the Program. **10. Severance:** If any provision of this declaration is invalid or unenforceable in any jurisdiction, the phrase or clause is to be read down for the purpose of that jurisdiction, if possible, so as to be valid and enforceable. If the phrase or clause cannot be so read down it will be severed to the extent of the invalidity or unenforceability. Such severance does not affect the remaining provisions of this m declaration or affect the validity or enforceability of it in any other jurisdiction. I have read, understood, acknowledge and agree to the above declaration including the warning, release and indemnity.

Full Name _____ Sex: M / F Date of Birth: ___ / ___ / ___ Age: _____

Address _____ Suburb _____ P/Code: _____

Daytime Ph: _____ Mobile: _____

E-mail: _____

Emergency Contact: _____ Phone: _____

Surfer's Medical Information: (confidential) Please attach details of any medical conditions that coaches should be aware of.

Participant Signature: _____ Date: ___ / ___ / ___

Parent / Guardian Permission for Participants Under 18

I _____ am the parent or guardian of the applicant. I expressly agree to be responsible for the applicant's behaviour and agree to personally accept the conditions set out in this application and declaration including the provision by me of a release and indemnity in the terms set out above.

Parents Signature: _____ Date: ___ / ___ / ___

Course Selection

WEEKEND COURSES

Month: _____ Time: 9.00-10.30 Course: Saturday Sunday

PAYMENT OPTIONS

Cash Cheque / Money Order Visa / Mastercard

Total \$ _____ (*Please note a 2% administration fee will be charged for all credit card payments)

Card No: _____ / _____ / _____ / _____ Exp: ___ / ___ / ___

Cardholder Name: _____ Sign: _____