Dragon Boat Queensland Inc.
Individual Application and Declaration for 2025 – 2026

☐ **Adult – New** ☐ **Adult – Returning – ID .....** ☐ **Junior - New** ☐ **Junior – Returning – ID .....**

I, [name] ..... of [name of club] .....
hereby apply for membership of the abovementioned club and Dragon Boat Queensland (DBQ). In so applying, and in consideration of my application for membership being accepted, I acknowledge and agree that: -

1. DBQ for the purpose of this membership application and declaration means and includes DBQ Board members, its' members (including affiliated clubs), and where the context permits, their respective directors, officers, members, servants or agents.
2. If accepted, I will be a member of the affiliated club named on this form and the State Association DBQ
3. Insurance is in place that provides limited cover to me whilst I am performing or participating in any authorised or recognised DBQ activity (refer www.dbq.com.au).
4. The DBQ Rules is a contract between myself and DBQ. I will be bound by it and any By-laws made under it. I acknowledge and agree to comply with the Rules and AusDBF Code of Conduct if my application is accepted.
5. ***Warning***: Dragon boating can be inherently dangerous. Serious accidents can happen which may result in me being injured or even killed. I have voluntarily read and understood this warning and accept and assume the inherent risks involved with dragon boating.
6. ***Ability to swim***: It is strongly recommended that all participants in dragon boating can swim at least 100m. I will advise my club coach if I cannot swim 100m and I acknowledge that I MUST wear a PFD (personal floatation device) at all times (while on the water).
7. ***Exclusion of Liability***: Except where provided or required by law and such cannot be excluded, I agree that it is a condition of my membership (if accepted), that DBQ is absolved from all liability however arising from injury or damage however caused (whether fatal or otherwise) arising out of my membership and/or participation in a DBQ activity.
8. ***Release and Indemnity***: In consideration of DBQ accepting my application for membership, I:
    a. release and forever discharge DBQ from all Claims that I may have or may have had but for this release arising from or in connection with my membership and/ or participation in any DBQ activity, and
    b. Indemnify and hold harmless DBQ to the extent permitted by law in respect to any claim by any person including but not only another member of DBQ arising as a result of or in connection with my membership and / or participation in any DBQ activity.

    In this Clause 8, "claims" means and includes any action, suit, proceedings, claim, demand, damage, penalty cost or expense however arising but does not include a claim in respect of any action, suit made by any person entitled to make a claim under ether relevant DBQ insurance policy or under the DBQ Rules (Constitution) or By-laws.

9. ***Fitness to Participate***: I declare that I am and must continue to be medically and physically fit and able to participate in any Dragon boating activity. I am not and must not be a danger to myself or to the health and safety of others. I will immediately notify DBQ in writing (through my affiliated club) of any change to my fitness and ability to participate. I understand and accept that DBQ will continue to rely upon this declaration as evidence of my fitness and ability to participate.

    I have read and understood the attached Medical Disclosure Form and understand the level of training may involve strenuous levels of physical activity. I also declare that I have disclosed through this Medical Disclosure Form all previous or current injuries, disabilities or related medical conditions that may restrict my ability to train or which physical training or exercise or exertion may exacerbate.

10. ***Privacy***: I understand that the information I have provided to be entered on the membership database is necessary for the Objectives of DBQ. I acknowledge and agree that the information will be disclosed by my affiliated club, to the State association and the National association as required, and will only be used for the Objects of DBQ and to provide me with membership services. I understand that I will be able to access my information through my affiliated club and/or State association. If the information is not provided my membership application may be rejected. I acknowledge that DBQ may also use my personal information in accordance with privacy laws.

11. ***Copyright in photographs and right to use***: I acknowledge and consent to photographs being taken of me during my participation in DBQ activities. I acknowledge that DBQ owns the photographs and that DBQ may use the photographs for promotional or other purposes without my further consent being obtained.

Full Name of Applicant:			Date of Birth:
Address:			Mobile Phone number:
Emergency contact Next of Kin (*supply two*):	Name:	Contact No:	Relationship:
	Name:	Contact No:	Relationship:

I have read, understand, acknowledge and agree to the above declaration including the warning, exclusion of liability, release, indemnity and medical disclosure. I have updated my personal information in the DBQ membership database. I acknowledge that if my application is successful, I will be entitled to all benefits, advantages, privileges and services to DBQ membership.

Signed ..... Date: .....

Where the applicant is under 18 years of age this form must also be signed by the parent or guardian of the applicant.
I, am the parent/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 membership application and declaration including the provision by me of the release and indemnity in the terms set out above.

Parent/Guardian Signature ..... Name ..... Date .....

DRAGON BOAT QUEENSLAND INC.
MEDICAL DISCLOSURE FORM

By ticking the corresponding box(es) you are indicating that you have in the past, or are presently suffering an injury, disability or medical condition that may restrict your ability to train or to which physical training, exercise or exertion may exacerbate.

PLEASE CIRCLE PROBLEM AREAS

Head, Neck or Back	☐	Heart Complaints	☐
Knee or Ankle	☐	High Blood Pressure	☐
Feet or Toes	☐	Heart or Lungs	☐
Shoulder, Elbow or Wrist	☐	Diabetes	☐
Hands or Fingers	☐	Asthma	☐
Sight or Hearing	☐	Psychological Traumas	☐
Epilepsy	☐	Nervous Conditions	☐
Other: (please indicate)			

Are you being treated by a doctor at present?	☐	Do you have any problems completing any of the following tasks?	
Are you taking any medication at present? (please list)	☐	Kneeling or Squatting	☐
		Getting up from the ground	☐
		Bending or twisting of the torso	☐
		Additional comments relating to any of the information contained in this Medical Disclosure section.	
Do you have any allergies or adverse reaction to drugs or medical dressings or anything else? (please list)	☐		

Privacy Act

Dragon Boat Queensland is bound by Information Standards No. 42A. By completing the medical disclosure section on this form, you consent to us collecting that information. The medical information that you disclose is collected by Dragon Boat Queensland for use by your club's coaches & trainers to identify whether measures should be taken to reasonably and safely accommodate you during training. If you fail to answer any of the questions or provide full and frank disclosure the club coaches and trainers will not be able to assess whether any modification to training sessions is necessary to ensure safe practice. All information collected in this document will be held in the strictest of confidence and will NOT be disclosed to the General Membership or any third parties.