

QUEENSLAND BEACH VOLLEYBALL TOUR (QBVT)

PARTICIPANT WAIVER AND ACKNOWLEDGEMENT OF RISK

2026–27 Season • Version 2.0

ABOUT THIS EVENT

Event / Round name	QBVT # 2 – Hervey Bay
Date(s)	19-20 Sept, 2026
Venue	Torquay Beach, Hervey Bay
Promoter / Event organiser	Fraser Coast Volleyball Collective

ABOUT YOU

Full legal name	
Date of birth	
Email address	
Emergency contact name	
Emergency contact phone	
VQ / VA membership number (if known)	

1. ACKNOWLEDGEMENT OF RISK

I understand and acknowledge that beach volleyball is a physical sporting activity that carries inherent risks of injury, including serious injury or death. These risks exist even when the event is well-organised and safety precautions are in place.

The inherent risks of beach volleyball include, but are not limited to:

- physical contact with other participants, the ball, nets, posts, and other equipment;
- falls, collisions, and impact injuries on sand and surrounding surfaces (including hard or uneven surfaces near courts, walkways and grandstands);
- muscle, ligament, tendon and joint injuries from jumping, diving, and rapid changes of direction;
- head, neck and spinal injuries;
- heat stress, dehydration, sunburn and sun-related illness arising from outdoor competition, particularly at venues subject to high temperatures or humidity;
- cuts and lacerations from contact with sand, equipment or foreign objects;
- illness or injury arising from environmental conditions including extreme heat, storms, lightning, high winds and flooding; and
- injury arising from the actions of other participants, officials or bystanders, including accidental collisions and contact with balls and equipment.

I acknowledge that:

- a) I have read and understood this warning and the risks described;
- b) I am voluntarily choosing to participate in the Event with knowledge of these risks;
- c) I have had the opportunity to ask questions about the risks before signing this waiver; and
- d) I am physically fit and have no medical condition that would prevent me from safely participating, or if I have such a condition, I have obtained appropriate medical advice.

2. MEDICAL DISCLOSURE AND HEALTH MANAGEMENT

I acknowledge that my physical and medical condition can affect my safety and the safety of others when participating in the Event. To assist VQ and the event promoter in managing health and safety at the Event:

- a) I agree to disclose any medical conditions, injuries, allergies or other health issues that could reasonably affect my safe participation in the Event, if requested to do so by VQ or the event promoter;
- b) I agree to provide details of any regular medications that I am required to take during the Event if that information is reasonably necessary for emergency or first aid response;
- c) I understand that this information may be shared with relevant VQ staff, event officials and medical personnel on a need-to-know basis for the purpose of managing my health and safety at the Event;
- d) I am acknowledge that I am responsible for bringing any necessary medication, medical devices or supports to the Event and for managing their use, unless I am a junior participant and my parent/guardian has agreed other arrangements with VQ; and
- e) I consent to emergency medical treatment being provided to me if I am injured or become unwell at the Event and a medical professional determines that treatment is necessary.

If I am under 18 years of age:

- a) my parent or legal guardian must provide more detailed medical information about me as requested by VQ, including any chronic conditions, allergies, behavioural or learning needs and emergency management plans (for example, asthma or anaphylaxis plans), before I participate in the Event;
- b) my parent or legal guardian is responsible for ensuring that I attend the Event with any required medication, medical devices or supports and that VQ is informed of any specific assistance I may need in an emergency; and
- c) I understand that VQ may rely on information provided by my parent or legal guardian when assessing whether it is safe for me to participate and may impose reasonable conditions or restrictions if required for health and safety reasons.

3. RELEASE AND LIMITATION OF LIABILITY

I acknowledge that my participation in the Event is a “recreational activity” and involves “obvious risk” of injury within the meaning of the *Civil Liability Act 2003* (Qld). I have been given a risk warning in clause 1 of this waiver and I have read and understood that warning.

To the extent permitted by law, I release and discharge Volleyball Queensland Inc. (ABN [insert]) and the event promoter (together, the Released Parties) from all claims, actions, damages, costs and expenses arising from or in connection with my participation in the Event, including claims arising from any act or omission of the Released Parties or their officers, employees, contractors and volunteers. To the extent permitted by section 18 of the *Civil Liability Act 2003* (Qld), I agree that the Released Parties are not liable for any harm suffered by me as a result of the materialisation of an obvious risk of this recreational activity, including where that harm is alleged to have been caused by the negligence of the Released Parties or their officers, employees, contractors or volunteers.

I understand that this release does not apply to liability that cannot be excluded by law, including liability for:

- personal injury caused by conduct of the Released Parties that is reckless or intentional;
- rights and remedies that cannot be excluded or limited under the Australian Consumer Law; or
- any other liability that cannot be excluded by operation of law.

4. INDEMNITY

I agree to indemnify and hold harmless the Released Parties from any claim, loss, damage or expense arising from:

- a) my own negligent or reckless conduct during the Event;
- b) my breach of VQ's rules, policies or competition regulations; or
- c) any false or misleading information I have provided in this waiver.

5. INSURANCE AND MEMBERSHIP

I understand that:

- personal accident and public liability insurance cover for registered participants at VQ-sanctioned events is provided through VQ's and Volleyball Australia's membership insurance program, subject to the terms and conditions of that program;
- this insurance cover is contingent on me holding a current and valid VQ/VA registration at the time of the Event and meeting any other eligibility criteria under the membership insurance program;
- if I am not a current registered member, I understand that I may have limited or no cover under the VQ/VA membership insurance program, and I am responsible for obtaining any personal insurance (including medical, income protection and travel insurance) that I consider appropriate for my own circumstances;
- VQ's insurance program does not cover all losses or injuries, may be subject to deductibles and limits, and does not provide comprehensive cover for personal property, loss of income or other consequential loss and I am responsible for obtaining any additional personal insurance I consider appropriate; and
- VQ does not hold event cancellation or abandonment insurance and if the Event is cancelled, interrupted or rescheduled due to weather, safety or other reasons beyond VQ's control, any refunds or credits will be determined in accordance with VQ's policies and any applicable laws; .

6. MEDIA, PHOTOGRAPHY AND PRIVACY

I consent to VQ and the event promoter photographing and filming me during the Event and using those images and footage for:

- promotion of the QBVT and VQ's programs through VQ's website, social media channels and other communications; and
- event reporting and documentation purposes.

I understand that:

- a) I may withdraw this consent at any time by contacting VQ in writing, but withdrawal does not require VQ to remove images already published;
- b) VQ will handle my personal information, including photographs and footage that identify me, in accordance with its Privacy Policy and the Privacy Act 1988 (Cth);
- c) VQ's Photography & Videography Policy may set out additional rules and safeguards regarding the capture and use of images and footage at events, including specific protections for junior participants, and I can request a copy of that policy from VQ; and
- d) if I do not wish to be photographed, I should indicate this preference at the point of registration and notify the event promoter or VQ representative before the Event commences so that reasonable steps can be taken to respect my preference.

7. CODE OF CONDUCT AND INTEGRITY OBLIGATIONS

I agree to:

- a) compete and conduct myself in accordance with VQ's Code of Conduct and the Volleyball Australia National Integrity Framework;
- b) treat all participants, officials, volunteers and spectators with respect;
- c) comply with all reasonable and lawful directions given by event officials, the Tournament Director and VQ representatives;
- d) refrain from making public statements — including on social media or other public platforms — about VQ, the QBVT, other participants, officials or volunteers that are defamatory, harassing, discriminatory or that could reasonably be expected to bring VQ or the QBVT into disrepute; and e) accept the outcome of any conduct or integrity proceedings conducted under VQ's or Volleyball Australia's applicable rules.

8. GOVERNING LAW

This waiver is governed by the laws of Queensland, Australia. Any dispute arising from this waiver will be subject to the jurisdiction of the courts of Queensland.

DECLARATION AND SIGNATURE — ADULT PARTICIPANT (18 YEARS AND OVER)

I declare that:

- I am 18 years of age or older;
- I have read and understood the contents of this waiver;
- I am signing this waiver voluntarily and without duress; and
- the information I have provided is true and correct.

Full name	
Signature	
Date	

PARENTAL / GUARDIAN CONSENT — PARTICIPANT UNDER 18 YEARS

To be completed by a parent or legal guardian if the participant is under 18 years of age.

I, the undersigned parent or legal guardian of the participant named below, declare that:

- a) I have read and understood the contents of this waiver, including the Acknowledgement of Risk in section 1 and the Release and Limitation of Liability in section 2;
- b) I understand that beach volleyball and participation in the Event carries inherent risks of injury, including serious injury or death, and that those risks cannot be completely eliminated even when safety precautions are in place.
- c) I consent to my child / the person in my care participating in the Event on the terms set out in this waiver;
- d) I have provided VQ with accurate and complete information about the participant's relevant medical conditions, allergies, medications and any emergency management plans requested by VQ, and I understand that VQ will rely on this information when managing the participant's health and safety at the Event;
- e) I consent to emergency medical treatment being administered to the participant if required and a medical professional determines it is necessary;
- f) I consent to the collection and use of photographs and footage of the participant as described in section 5 of this waiver and in accordance with VQ's Photography & Videography Policy and Privacy Policy, subject to any opt-out or preferences I have notified to VQ;
- g) I acknowledge that VQ's Child Safety Policy will apply at the Event and that VQ and the event promoter will seek to manage child-safety risks in accordance with that policy and applicable child-safety laws; and
- h) the information I have provided is true and correct and I am authorised to give this consent for the participant.

Participant's full name	
Participant's date of birth	
Parent / guardian full name	
Relationship to participant	
Parent / guardian signature	
Date	
Parent / guardian contact phone	

Return completed waivers to the event promoter before participating. Queries: contact VQ on (07) 3367 1991 or [insert email].
For child safety concerns, contact the nominated child safety contact for this event or the VQ CEO.