



**Brisbane | Ipswich | Logan | Gold Coast**

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**0427 802 078**

## **Consent & Acknowledgment Form**

**Business Owner:** Reed Buckley

**Participant Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Parent/Guardian (if under 18):** \_\_\_\_\_

### **Section 1 – General Participation & Acknowledgement of Risk**

I acknowledge that:

1. Ironbark Adventure Mentoring provides outdoor adventure-based mentoring activities, including (but not limited to) mountain biking, hiking, bushwalking, fishing, camping, and ball sports.
2. These activities carry inherent risks, including but not limited to: falls, collisions, equipment failure, water-related incidents, exposure to weather, bites/stings, and other injuries related to or as a result from these activities.
3. The facilitator will take all reasonable precautions to minimise risk through planning, supervision, safety briefings, and risk assessments.

4. Despite these measures, I understand that some risks cannot be completely eliminated.
5. I voluntarily consent to my/my child's participation and assume responsibility for understanding and accepting these risks.

**Signature (Participant or Guardian):**

\_\_\_\_\_

**Date:** \_\_\_\_\_

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## **Section 2 – Medical & Emergency Consent**

I confirm that:

1. All relevant medical information, including allergies, conditions, medications, or other support needs, has been provided to Ironbark Adventure Mentoring.
2. In the event of injury, illness, or emergency, I authorise Ironbark Adventure Mentoring and its staff to:
  - a. Administer first aid, and
  - b. Seek medical or hospital treatment as necessary.
3. I accept responsibility for any medical costs not covered by Medicare, NDIS, or private insurance.
4. I will notify the business promptly of any changes to my/my child's health that may affect participation.

**Signature (Participant or Guardian):**

\_\_\_\_\_

**Date:** \_\_\_\_\_

### Section 3 – Transport Consent

I consent to Ironbark Adventure Mentoring providing transport for myself/my child:

- Pick-up and drop-off at agreed locations
- Travel in a registered, insured vehicle with a licensed driver
- Seatbelts or restraints worn at all times
- Transport fees may apply, as outlined in the Service Agreement

☐ Yes – I consent

☐ No – I will arrange my own/my child's transport

**Initials:** \_\_\_\_\_

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### Section 4 – Media & Photography Consent (Optional)

I consent to photos/videos of myself/my child being taken and used for:

- Program records (case notes, reports, safety documentation)
- Promotion of Ironbark Adventure Mentoring (website, brochures, social media)
- Sharing with families/carers and NDIS providers (if applicable)

☐ Yes – Program records only

☐ Yes – Program records + promotional use

☐ No – I do not consent to any media use

**Initials:** \_\_\_\_\_

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### Section 5 – NDIS Information Sharing (If Applicable)

I consent to Ironbark Adventure Mentoring sharing relevant information (case notes, session reports, goals, incident reports) with:

- My/my child's NDIS provider(s) and support coordinator
- Only for the purpose of service delivery, reporting, and claims
- In accordance with the Privacy Policy

☐ Yes – I consent

☐ No – I do not consent

**Initials:** \_\_\_\_\_

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## Section 6 – Behaviour & Participation Agreement

I understand and agree that:

- Participants must follow all safety instructions and respect staff, peers, equipment, and the environment
- Unsafe, harmful, or disrespectful behaviour may result in suspension or termination of services
- A Code of Conduct for participants has been provided, explained, and must be followed

**Signature (Participant or Guardian):**

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**Date:** -----

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## Section 7 – Liability, Waiver & Acknowledgement

- I understand that participation involves inherent risks
- I release, indemnify, and hold harmless Ironbark Adventure Mentoring, its owner, staff, and contractors from any claims, liability, loss, or damage arising from participation, except where liability cannot be excluded by law
- I have read and understood the Child Safe Policy and Privacy Policy and agree to their terms
- I have had the opportunity to ask questions and have received satisfactory answers
- I give informed consent for participation in Ironbark Adventure Mentoring services

**Signature (Participant or Guardian):**

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**Date:** -----

**Print Name:**

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## Section 8 – Emergency Contacts & Acknowledgement

- **Emergency Contact Details:**

Emergency Contact Name:

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Phone: -----

- **Medical Information Update Consent:**

I agree to notify Ironbark Adventure Mentoring promptly of any changes to medical conditions, medications, or support needs.

- **Acknowledgment of Policies:**

I acknowledge that I have received, read, and understood the Child Safe Policy, Privacy Policy, and Code of Conduct, and I agree to adhere to them.

**Initials:** -----