



## Durham Fell Runners

### New/non-member Activity Liability Waiver Form

**Name:**

**Age:**

**Car Registration Number:**

**Emergency Contact Name:**

**Emergency Contact Number:**

- I will adhere to Covid-19 rules as set out by the UK and local government, England Athletics and Durham Fell Runners
- I accept the hazards inherent in fell running and related training activities and acknowledge that I am participating in this activity at my own risk.
- I confirm that I will comply with the rules imposed on me by the Durham Fell Runners for the duration of the activity.
- I confirm that I have read and will comply with the DFR "Requirements for Runners".
- I acknowledge and agree that I am responsible for determining whether I have the skills equipment and fitness to participate in this activity.
- I accept that neither the activity organiser nor the Durham fell Runners shall be liable to me for any injury, loss or damage of any nature to me or my property arising out of my participation in this activity (other than in respect of death or personal injury as a result of their negligence).
- I consent to Durham Fell Runners contacting a next of kin should the situation require

**Signature:**

**Date:**