



2025 Back to the Bush Veterans' Reunion Market Day - Booking Form

Date of Markets: Saturday, 1st November 2025

Time of Markets: 10:00am – 2:30pm

Location of Markets: Johnson Street, Bruce Rock WA 6418

Personal De	<u>etails</u>		
Full Name:			
Business Nam	e (if applicable):		_
Address:			
Contact Numb	er:		
Email Address	:		-
Stall Informat	ion		
Description of			
	plants, clothing, produc	ce, crafts, etc.)	
Power Require	ements (please tick):		
□ No Power	☐ Standard Power	☐ 3-Phase Power	
•	Insurance Provider:		
Payment Deta	<u>ils (EFT)</u> Bruce Rock CRC		tallholder Application (Shire red to be completed

Please record your name/business name as a reference when paying





Completed:

Yes

No

BSB: 036-105

Acc Number: 206368





Fees and Payment

Fee Type	Cost
Stall Fee Only	\$20.00
Stall Fee + Trestle Table (6ft)	\$25.00
Extra Trestle Tables (each depending on availability)	\$5.00
Total Fee Payable: \$	
All bookings are non-refundable and paym e	ents required up front
Terms and Conditions - Full payment and form submission required	d at the time of booking unless prior arrangements are made.
- Market opens at 10:00am and closes to the	e public at 2:30pm.
- Stall setup from 8:30am no earlier than this	s; pack down must be complete by 3:30pm.
- Stallholders must provide their own shade	shelter.
- Stall spaces are allocated by Bruce Rock (CRC on a first-come, first-served basis.
I agree to the conditions as outlined above	e:
Signature	Date



Bruce Rock





RELEASE AND WAIVER OF LIABILITY, AND ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

READ THIS DOCUMENT **CAREFULLY** BEFORE SIGNING. THIS DOCUMENT HAS LEGAL CONSEQUENCES AND WILL AFFECT YOUR LEGAL RIGHTS AND WILL LIMIT OR ELIMINATE YOUR ABILITY TO BRING FUTURE LEGAL ACTIONS.

In consideration of being permitted by Bruce Rock Community Resource Centre (Inc) to participate in the **2025 Back to the Bush Veterans' Reunion Market Day - Bruce Rock on Saturday, 1 November 2025**, including the operation of holding a stall and selling items, I understand and acknowledge that by signing below, that I am legally agreeing to the statements in the following Release and Waiver of Liability, and Assumption of Risk and Indemnity Agreement ("Agreement") and that these statements are being accepted and relied upon by the Released Parties, as defined below. I hereby freely and voluntarily acknowledge and/or take action for myself, and on behalf of my spouse, children, parents, guardians, heirs, next of kin, and any legal or personal representatives, executors, administrators, successors and assigns, or anyone else who might claim or sue on my behalf, as follows:

- 1. I HEREBY ACKNOWLEDGE AND ASSUME ALL OF THE RISKS OF PARTICIPATING IN THIS EVENT. I acknowledge activities in this Event can be inherently dangerous and carry with them the potential for serious bodily injury, permanent disability, paralysis and death, and property damage or loss. I acknowledge and agree that it is my responsibility to determine whether I am sufficiently fit and healthy enough to safely participate in the Event, and I have no physical or medical condition that would endanger or interfere with my ability to safely participate in the Event. I further acknowledge that these risks include risks that may be the result of negligent acts, omissions, and/or carelessness of the Released Parties, as defined herein. I understand that I will be participating in the Event at my own risk, that I am responsible for the risk of participation in the Event.
- 2. I WAIVE, RELEASE, AND FOREVER DISCHARGE the Bruce Rock Community Resource Centre (Inc) and each of their officers, directors, supervisors, employees, and other participants and representatives (individually and collectively, the "Released Parties"), from any and all claims, liabilities of every kind, demands, damages (including direct, indirect, incidental, special and/or consequential), losses (economic and non-economic), and causes of action, of any kind or any nature, which I have or may have in the future, including court costs, attorneys' fees and litigation expenses (individually and collectively, the "Claims") that may arise out of, result from, or relate to my participation in the Event or my traveling to or from the Event, including my death, personal injury, partial or permanent disability, negligence, property damage and damages of any kind, property theft, and Claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (at the Event site or elsewhere), and any Claims for medical or hospital expenses, even if such Claims are caused by the negligent acts, omissions, or the carelessness of the Released Parties.
- 3. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the Claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY, DEFEND, and HOLD HARMLESS the Released Parties from any and all expenses incurred, Claims made by me or other individuals or entities, for liabilities assessed against the Released Parties, including but not limited to court costs, attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, and/or my actions or inactions which cause injury or damage to any other person.

I HEREBY AFFIRM THAT I AM OVER EIGHTEEN (18) YEARS OF AGE, I HAVE READ THIS AGREEMENT, I UNDERSTAND ITS CONTENT, AND INTENTIONALLY AND VOLUNTARILY SIGN THIS AGREEMENT.

PRINTED NAME_	
SIGNATURE	
DATE	



