



**New Zealand Whitewater Academy Limited**

*Health and Safety Induction Register (Risk disclosure form)*

Date: \_\_\_\_\_ (DD/MM/YYYY) Trip Time: \_\_\_\_\_  
River(s) of activity \_\_\_\_\_  
River Grade (please circle): Flat Water / Grade 2 / Grade 3 / Grade 4 / Grade 5

**Customer Information**

Full Name: \_\_\_\_\_  
D.O.B: \_\_\_\_\_ (DD/MM/YYYY)  
Contact Number: \_\_\_\_\_  
Emergency Contact Number: \_\_\_\_\_  
Medical Conditions, Allergies and previous/re occurring injuries?  
Yes / No (please circle) If you answered yes please specify below:  
\_\_\_\_\_

**River Grading Explanation**

- Grade 5** - Very powerful rapids with very confused and broken water, large drops, violent currents - a definite risk to personal safety exists.
- Grade 4** - Difficult rapids with high, powerful, irregular waves. Broken water, strong stoppers, Ledges and drops, precise maneuvers required.
- Grade 3** - Rapids with fairly high waves, stoppers, strong currents and small drops.
- Grade 2** - Regular medium sized waves, low ledges or drops, easy currents with gradual bends.

**Disclaimer**

I acknowledge and understand that whitewater kayaking is an adventure based activity with a degree of risk that increases with the grade of river. The inherent risks of harm including physical injury, drowning, capsizing and swimming in cold, fast flowing water. I understand that a moderate level of fitness is required for whitewater kayaking. I agree to follow the instructions of the NZWA instructors, and I understand that this is critical to my safety and the safety of others. I agree to disclose all medical conditions, allergies or previous injuries that may concern physical impairment for the activity. I agree that all activities at NZWA have a **NO DRUG AND ALCOHOL POLICY**. I am of the appropriate age to participate in whitewater activities (if unsure please ask staff). I understand and give permission that photographs taken of my participation can be used in NZWA advertising.

When the customer is under the age of 15 years old, the guardian is responsible for agreeing on all the above information and signing the induction register on behalf of the participant.

**Participants should be aware that NZWA cannot guarantee their safety.**

Signature of Participant: \_\_\_\_\_ Signature of Legal Guardian: \_\_\_\_\_