



**BEAUFORT WALKFEST**  
**Sunday 29<sup>th</sup> March 2026**

**REGISTRATION FORM**

Please return this form to [beaufortwalkfest@gmail.com](mailto:beaufortwalkfest@gmail.com) or to 56 Lovejoy Lane Beaufort 3373.

Name: .....

Post Code: .....

Phone: .....

Email .....

How did you hear about our event? .....

**Which walk(s) are you registering to attend? Please tick. (See walk descriptions for times.)**

Beeripmo (section)* Grevillea Lookout	Morning	<input type="checkbox"/>	Town Circuit & History Walk	Afternoon	<input type="checkbox"/>
Waterloo State Forest * - stroll (nature)	Morning	<input type="checkbox"/>	Mining Relics Walk	Afternoon	<input type="checkbox"/>
Paradise Walk (Mt Cole) *	Morning	<input type="checkbox"/>	Wheelie Walk	Afternoon	<input type="checkbox"/>
		<input type="checkbox"/>	Lake and Family Discovery		<input type="checkbox"/>
Musical Gully and Stephens Track-	Morning	<input type="checkbox"/>	Walk		
Lake and Trawalla State Forest Walk *	Morning	<input type="checkbox"/>			
Cemetery Walk & Yam holes	Morning	<input type="checkbox"/>			

\* The walks marked with an asterisk will venture to places where mobile phone coverage may not be available. People are advised that there could be considerable delay in obtaining medical assistance on these walks.

**Emergency Contact** Name: .....

Relationship to you: ..... Phone Number.....

Ambulance Subscriber: Yes / No

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**Disclaimer**

I am aware that participation in this event may expose me to risks that could lead to injury, illness or death, and/or to the loss of, or damage to, my property. To minimise these risks, I have endeavoured to ensure that:

The activity is within my abilities.

I carry food, water and equipment appropriate for the activity.

I carry all documentation and warnings pertaining to my particular conditions.

I will make every effort to remain with the rest of the party during the activity and will accept the instructions of the leader of the activity.

I have read and I understand these requirements. I have considered the risks before choosing to sign the acknowledgement of risk. I still wish to join this activity. I accept in signing this form that I will take responsibility for my own actions.

Signed: ..... Date: .....

(To be signed by parent or responsible adult if participant is under 18 years of age)