

Mobi-Chair® waiver form



Agreement

Port Phillip City Council has partnered with the St Kilda Surf Life Saving Club to provide this Mobi-Chair® for use by the community free of charge at Council's beaches.

Use of the Mobi-Chair® is at the User and the assisting person's own risk and may result in loss, damage or injury to the User and the person assisting or any other person/s.

A support person or carer is required to be present when using the chair.

Please report any damage to the Mobi-Chair® directly to the Life Saving Club.

Your full name Required

Limitation of liability, release and indemnity

- ☐ I Understand that the use of this Mobi-Chair® may cause loss, damage or injury to the user, assisting person (including but not limited to a parent, guardian, supervisor or carer) or other person/s. Required
- ☐ I Agree, to the extent permitted by law, to not hold Council, it's staff or contractors liable for any action, suits, proceedings, claims, demands, losses, damages, penalties, fines, costs or expenses however arising from or in connection with the use of this Mobi-Chair®; Required
- ☐ I Agree, to the extent permitted by law, to indemnify and release Council, its staff or contractors in respect of all actions, suits, proceedings, claims, demands, losses, damages, penalties, fines, costs or experiences however arising as a result of or in connection with the use of this Mobi-Chair®. Required

Terms and Conditions

Council cannot take into account circumstances which put the Mobi-Chair® or the controller outside of their specified operating conditions, and so it is important that the user follows the precautions below:

Wehn using the Mobi-Chair®:

- You must have a minimum of 1 support person present, 2 support people are recommended when entering the water.
- Only enter the water when Lifeguards are present and on duty. You won't be able to access the chair without lifeguards present.
- Do not use the chair if there is any noticeable damage and please report this immediately to the lifeguards.

Acknowledgement

☐ I have read and agree to the terms and conditions listed above. Required

Signature Required

☒ Draw signature below ☐ Upload photo of signature



The personal information requested on this form is being collected by the City of Port Phillip (CoPP). This information will be used solely by the council for that primary purpose or directly related purposes. It will be treated in compliance with the [CoPP Information Privacy Policy](#) and the [Information Privacy Act](#).

Please complete the following:

☐ I'm not a robot

reCAPTCHA
Privacy - Terms

