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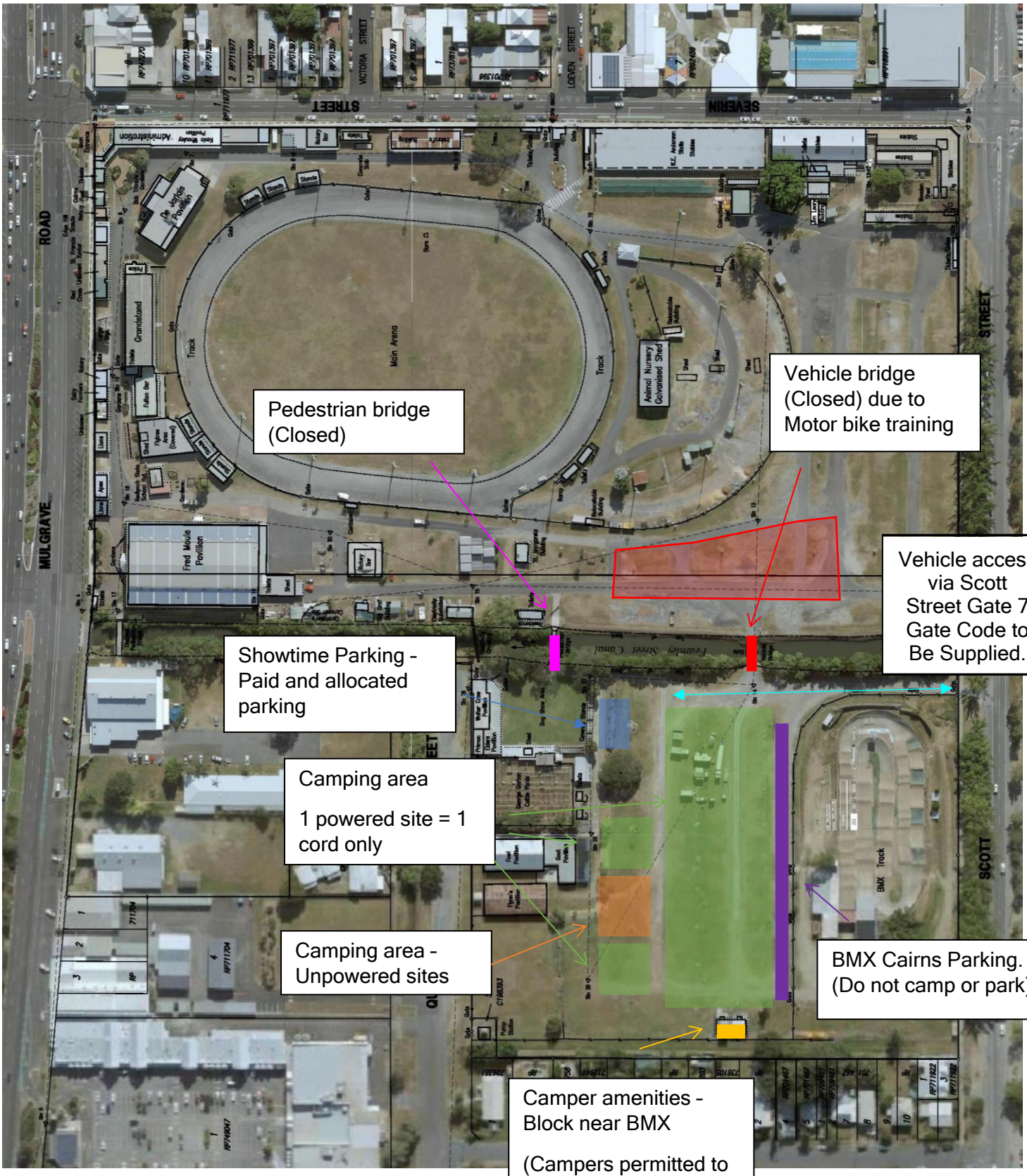
CAIRNS SHOWGROUNDS - CAMPING POLICY AND GUIDELINES

1. Authorised campers and Show Time parking patrons only. Access times are Midday to Midday the next day or part thereof.
2. Camping permit must be visible on the dashboard, tent or caravan whilst on the campsite.
3. The site fee includes 1 power lead per site. Additional power lead(s) on the same site will incur an additional site fee charge.
4. Campers must abide by the camping booking terms and conditions (see below) whilst on the Cairns Showgrounds including all Qld Chief Health Public Health Directions and EPA regulations.
5. The Cairns Show Association and their staff reserves the right to remove campers for any breeches of the camping terms and conditions.
6. Campers enter grounds at own risk and releases CAIRNS AGRICULTURAL, PASTORAL AND MINING ASSOC. from any liability for any occurrence that may affect the campers during their occupancy of the grounds. Occupants agree to indemnify the CAIRNS AGRICULTURAL, PASTORAL AND MINING ASSOC. its servants and agents, and to keep them indemnified, against all actions, claims, demands, loss, damage, injury, costs and expenses arising from, or in any way connected with, negligence or breach of these camp area rules by occupants.
7. The campgrounds is an area where photography, audio and video recording may occur.
8. Cairns Showgrounds Grounds Team Contact: Anthony / Chris (Caretaker) on 0419 792 200.

Terms and Conditions (from booking form)

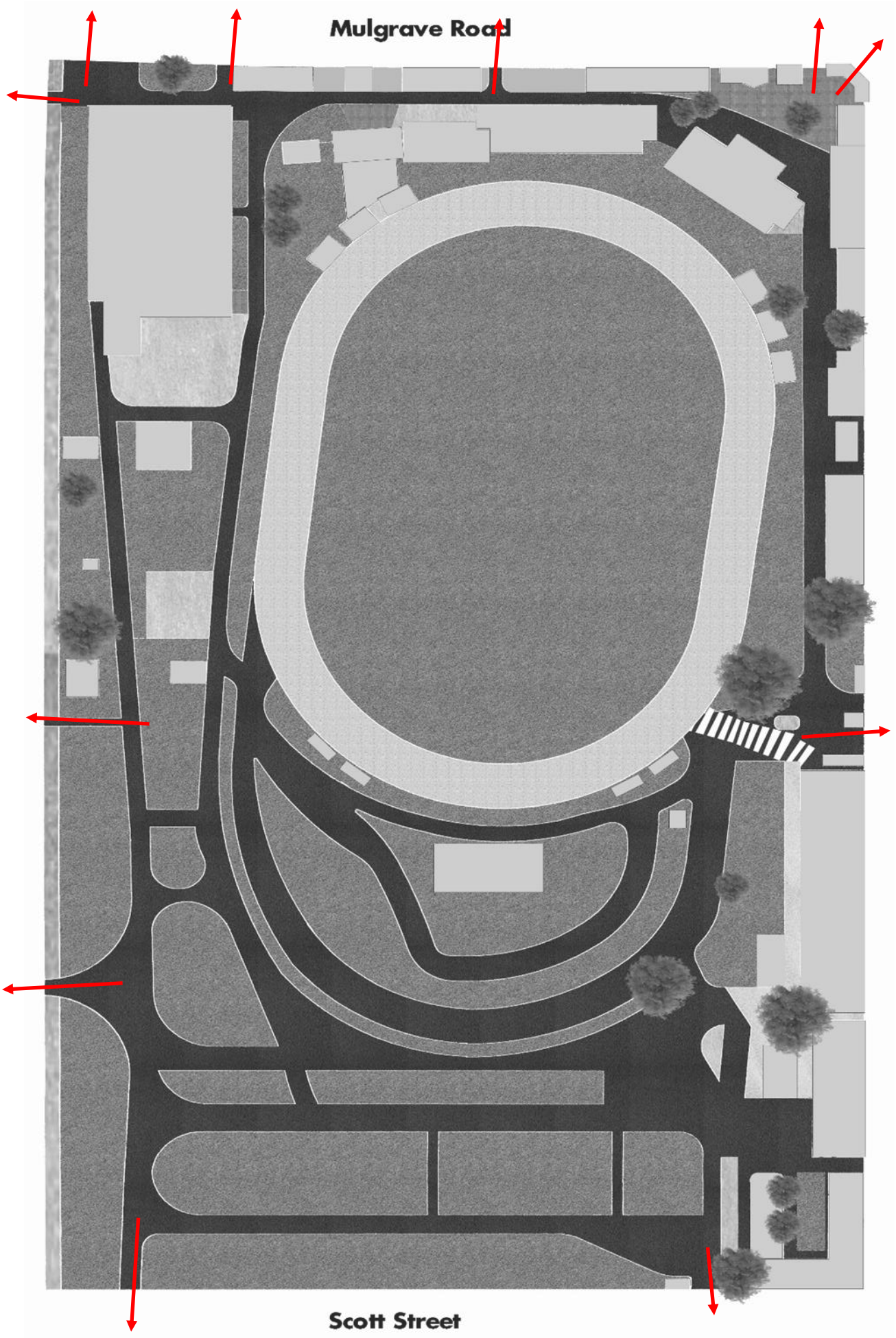
1. Camping is only permitted for members of the Showman's Guild and campers associated with an Event held at the Cairns Showgrounds. Proof of attendance for showground event or member of Showman's Guild will be required.
2. Animals are to be kept on leads. **AT ALL TIMES**. Any dogs not on leads will be removed from the grounds at the expense of the person named above. All animal waste must be collected and disposed of appropriately.
3. The Cairns show Association accepts no responsibility for damaged or stolen property.
4. All hire fees must be paid prior to commencement of accommodation period.
5. For compliance all camping booking forms will be passed on to the Cairns Regional Council Regulatory Compliance Department – Attention Environment Officer / Regulator.
6. Campers must not contaminate waterways, roadside gutters, stormwater drainage as per the Environmental Protection Regulation 2019. Please refer to the attached Schedule 10 – Prescribed Water Contaminants. Laundry wastewater may be discharged to ground provided the lines are appropriated covered with a filter sock that measures 50-100 microns. These socks must be securely attached to ensure no seepage. Foot socks and stockings are not appropriate methods. A limited amount of filter socks can be purchased from the showgrounds office for $5 each. The Cairns Show Association is operating and complying with all the Qld Chief Health Officer public health directions and campers agree to comply will all health regulations to assist in containing, or to respond to the spread of COVID-19 within the community.
7. All campers agree to leave their camp site in a clean and tidy manner.

CAIRNS SHOWGROUNDS - CAMPING GROUNDS MAP



Updated as of 30/07/2025

CAIRNS SHOWGROUNDS – EVACUATION PLAN



CAIRNS SHOW ASSOCIATION
INCIDENT / ACCIDENT REPORT FORM

Name of injured person: _____

Home address: _____

Phone: _____ Mobile: _____

D.O.B: _____ Male ☐ Female ☐

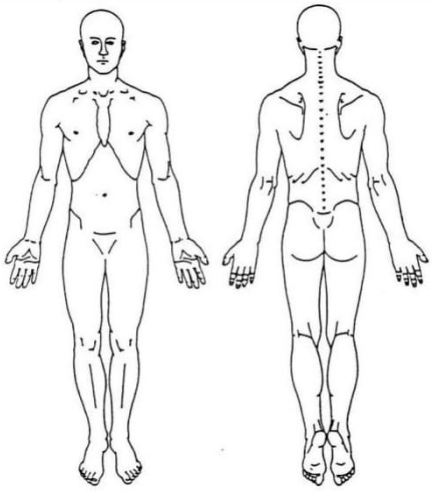
Doctor's Details: _____

Where did the accident occur (Venue)? _____

Exact place: _____ Time: _____ am/pm

Date: _____

Nature of Injury



Indicate location and type of injury using the above key

Part of body injured:

Eye	☐	Back	☐
Ear	☐	Torso – other	☐
Face	☐	HIB	☐
Head – other	☐	Groin	☐
Neck	☐	Knee	☐
Shoulder	☐	Ankle	☐
Elbow	☐	Foot	☐
Wrist	☐	Toe	☐
Hand	☐	Leg – other	☐
Finger	☐	Internal	☐
Arm – other	☐	Skin	☐
Chest	☐	Respiratory	☐
		Multiple	☐

Description of reason for personal damage:

01	Strain/sprain	05	Fracture	11	Allergy
02	Bruise/crush	06	Burn/scold	13	Superficial
03	Laceration / cut	08	Bite/sting	14	Multiple
		09	Poisoning	15	Alcohol related
04	Dislocation	10	Concussion	16	Food related

Action (first aid given): _____

_____

Further action taken (if any): ☐ Nil ☐ Doctor

☐ Ambulance ☐ Hospital

Accident Witness (1) name: _____ Phone: _____

Accident Witness (2) name: _____ Phone: _____

Reporting Person's name: _____

Signature: _____ Date: _____

Further comments (if necessary) Cairns Show Association only

_____

_____

_____

Manager's Signature

Subsequent Action:

Workers' compensation form completed ☐

Insurance claim form completed ☐

Please return completed incident / accident form asap to venues@cairns-show.com. Thank you.