

INDEMNITY FORM FOR PARENTS



I, the undersigned,

_____ (full names),

the parent/guardian of _____ (full names),
hereby consent to him/her attending the camp to be held at Lagayim Adventure Centre.

I understand and appreciate the inherent risks and dangers of the location of the camp site, being outside of an urban environment in natural surroundings. I also take note of the fact that there is a swimming pool on the premises.

I acknowledge and undertake that I have no claim against Lagayim Adventure Centre, their personnel, contractors or directors on account of death or personal injury of such minor or the loss of or damage to personal belongings of such minor arising from any cause whatsoever and indemnify and hold Lagayim Adventure Centre, their personnel, contractors or directors harmless against any such claim, demand or liability.

I confirm that I have read and accept the rules of the camp and undertake to ensure that my child read and/or understands the rules.

Without limiting the generality of the foregoing, I hereby confirm that my child has been informed that children under 16 years of age may only use the swimming pool under supervision of an adult (older than 18 years).

I HEREBY GIVE MY PERMISSION TO THE RESPONSIBLE PERSONS TO, IF NECESSARY, TAKE

TO A DOCTOR OR HOSPITAL AND AGREE TO EMERGENCY TREATMENT.

TELEPHONE NUMBERS:

WORK:

HOME:

CELL NO:

SIGNATURE

ALTERNATIVE NUMBER IN CASE OF AN EMERGENCY: _____

ALLERGIES/MEDICAL CONDITIONS TO BE AWARE OF:

MEDICAL AID NAME AND NUMBER: _____

DATED AT _____ ON THIS _____ DAY OF

_____ 20 _____

FULL NAME AND SURNAME OF PARENT/GUARDIAN

SIGNATURE OF PARENT/GUARDIAN

SIGNATURE