



Southcity Christian College NPC (Registration No.2004/012009/08) t/a
SOUTHCITY CHRISTIAN SCHOOLS
COLLEGE

INDEMNITY FORM

Please take note, this is a legal document and ONLY the parent/legal guardian may complete & sign.

1. General Information:

1.1 Full name of Pupil: _____

1.2 Name & Address of Parent / Legal Guardian _____

1.3 Medical Aid Fund: _____ No: _____

1.4 Tel Number: Parent / Legal Guardian

Home: _____ Work: _____ Cell: _____

1.5 Does your child have any allergies or on any medication? Yes / No

If yes, please give details: _____

Whilst Southcity Christian School has taken reasonable measures to ensure the safety of the children, it is a requirement that the parents sign an indemnity form as set out below.

2. Letter of Consent:

I, _____ (full names of parent or legal guardian) parent and/or legal guardian of the under-mentioned, over whom I have custody and control, hereby consent to _____ (full names of child)

participating in the various activities, including but not limited to sports activities, camps and educational outings arranged and organised by the School, and, where relevant, to the child being transported to and from the said activities by means of transport made available by the School for that purpose. (Inclusive of any outsourced transport.)

I, do hereby affirm and acknowledge that I am fully aware of the inherent hazards, dangers and risks associated with various activities and /or excursions mentioned on above.

I fully understand that participating in these activities may lead to possible injury, loss of life or damage to property. I understand that an activity and excursion may be conducted at a site or location that is remote from medical assistance and hospitals, nevertheless, I consent to my child embarking on the activities and /or excursions even in the absence of competent medical assistance.

Additionally, I understand that there are also risks associated with transport to and from the various activities and / or excursions, including, but not limited to accidents, theft and high jacking and possible damage, injury or loss of life as a result of the aforesaid transport. Despite the potential hazards and dangers associated with the activities and / or excursions and transport, I consent, freely accept and expressly assume all risk, dangers and hazards that may arise from these activities which could result in personal injury, loss of life and property damage to me or my child.

I understand that subject to the Schools taking reasonable care to avoid harm and save for any gross negligence on the part of the Schools, its employees or agents, the Schools are not responsible for loss or damage resulting from such sports, activities or programmes and you indemnify the Schools against any claims in that regard.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT:

In consideration of my child being allowed to participate in the various activities and / or excursions and transport as well as the use of any facilities provided for, at and during the various activities and / or excursions and transport, I/We hereby:-

1. take notice, that Southcity Christian Schools has a duty of care towards each pupil and will constantly endeavour to take such steps as may be reasonably required in the circumstances, to do what it can, to keep the pupil/child out of harm and free from loss, taking into account what can be reasonably foreseen and provided for in each case.
2. indemnify and hold harmless the Schools, the Board, the Head of School and the employees as well as their authorised agents and/or representatives against actions, proceedings, claims, demands, liabilities, losses and reasonable costs and expenses whatsoever in respect of, or in connection with damage or loss to property, real or personal, and injury to persons, including injury resulting in death, arising out of or as a consequence of the Pupil's enrolment at Southcity Schools, save that the Schools shall be liable and liability will not be excluded under this clause in respect of loss occasioned by gross negligence and/or wilful misconduct attributable to the Schools, the Board, the Heads of School and the employees as well as their authorised agents and/or representatives.
3. take notice that the School does not take any responsibility for any theft or loss of, or damage or destruction to any property of whatever nature (including School clothing, sporting and IT equipment, books, or any other personal possessions) brought on to the School premises by the Pupil/s, unless the Schools or their staff are in physical possession of that property and damage occurs to that property either because:
 - i. the Schools or staff treated the property as their own; or
 - ii. the Schools or staff did not exercise the degree of care, diligence and skill that can reasonably be expected of a person responsible for managing property belonging to another person, when handling, safeguarding or using the property.
4. agree, that in the event an emergency has arisen and medical treatment is required and deemed necessary for my child, then Southcity Christian Schools, its Executive Board, teachers, employees, representatives or any accompanying parent may have the authority to extend such medical treatment as may be necessary on my behalf and I shall be responsible for the payment of any related cost or fees incurred in this regard.

By entering into this agreement, I am not relying on any oral or written representation or statements made, other than what is set forth in this agreement.

I/We declare that I/we have had adequate opportunity to receive and comprehend this Agreement, and comprehend the aim and purpose in the agreement and I/we acknowledge that I/we fully understand the terms, conditions and language.

**I HAVE READ THIS AGREEMENT, I UNDERSTAND IT,
I AGREE TO BE BOUND BY IT.
I HAVE HAD ADEQUATE OPPORTUNITY TO RECEIVE AND COMPREHEND THE CONTENTS OF THIS
AGREEMENT.**

Signed at _____ on this _____ day of _____ 20__

Signature of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Name of Parent or Legal Guardian

Name of Parent or Legal Guardian

Signature of Witness

Name of Witness