



**INDEMNITY** - to be copied and completed for each group member and then brought with the group to the Centre.

I, the undersigned, being the \*father/mother/guardian of the Member hereby:

- (a) \*Would/would not like the member to take part in all activities. (If not, please give clear information about those activities which you would prefer the Member not to participate in)
  
- (b) Freely and voluntarily confirm my agreement to the Member taking part in the event(s) or activity(ies) specified on Page 1 \*(except for those activities I have indicated in paragraph B(a) above) and fully understand that participation will involve the member in an element of risk, the nature and consequences of which I am aware.
  
- (c) Agree to the Member being given such medical, surgical, dental or other treatment, including operations under general or local anaesthetic, and whether or not necessitating blood transfusions as may be recommended by a registered medical or dental practitioner and I hereby irrevocably authorise the Club or any representative or other agent of the Club to sign any written form of consent required to enable such treatment to be given, if the delay in obtaining my permission is considered inadvisable by the doctor/medical authorities/hospital concerned.
  
- (d) Undertake to advise the Club if the Member comes in contact with any infectious disease or develops an ailment, disability or disease as mentioned above after the date of completion of this form and prior to the date of commencement of the above event or activity.
  
- (e) Acknowledge and agree that neither the Club nor any of its officers, employees, agents or representatives can be held responsible or liable to compensate for the loss of or damage to any of the Member's personal belongings and that the Member is responsible at all times for the safe custody thereof.
  
- (f) Indemnify the Club, its officers, employees, agents and representatives from and against any liability, costs, claims or expenses howsoever arising whether directly or indirectly as a result of any accident, injury, illness or other damage of any kind whatsoever which the Member may suffer or sustain which is not due to the negligence of any such officer, employee, agent or representative including in particular (but without any limitation to the generality of the foregoing) where the said accident, injury, illness or other damage is a result of the member disobeying any lawful, reasonable instructions which may be given to him by the Club or any officer, employee, agent, or representative.

Date .....

Signed ..... Full name .....

Address .....

Telephone numbers: Home ..... Work .....

**IN CASE OF EMERGENCY PLEASE SUPPLY THE NAME AND TELEPHONE NUMBER OF A SECOND CONTACT:**

Name ..... Tel. No.....

The Club reserves the right to refuse attendance to any member if there are any aspects of concern raised by this form. The club or Unit may have their own version of this form, which is quite acceptable as far as Hindleap is concerned, as long as it covers the above issues.