



SOUTH AFRICAN SCOUT ASSOCIATION

**GUARDIAN CONSENT AND INDEMNITY – JML ROTARY SCOUT
For children under the age of 18 years**

To..... Skipper of JML Rotary Scout

I, being the mother/ father/ legal guardian of

a member of the Group, hereby request him/ her to take part in a sailing excursion on JML Rotary Scout to be held

from to

I hereby appoint and authorise the Skipper in charge to act in my place as parent/ guardian with full authority to consent to my son/ward/daughter undergoing surgical and/or medical treatment. I undertake to pay the costs of such treatment. I fully understand and accept that all activities are undertaken at my son/ward/daughter's own risk.

I am aware that neither the Scout Association of South Africa nor its Scouters, agents, employees, volunteers or any person associated with the Scout Association of South Africa (collectively referred to herein as "the Scout Association") accept responsibility for any loss, injury or damage that the person or property of my son/ward/daughter may sustain whilst engaged in any activity relating in any way to the yachting activity, including *inter-alia* transport to and from the yacht/harbour.

I hereby waive any right that I or my son/ward/daughter may have to claim compensation against the Scout Association, in respect of any loss, injury or damage incurred whilst engaged in any activity howsoever arising and whether as a result of wilful misconduct, omission, gross negligence, and/or negligence or otherwise and I indemnify the Scout Association against all such claims.

Address: _____

Signed: _____
Mother/Father/Legal
Guardian

Date: _____

Medical Aid Society _____

Medical Aid Number _____