



## INDEMNITY FORM

**Statement to be signed by the student (regardless of age) and the parent/legal guardian of a student who is below 21 in age.**

I confirm that the information below is true and correct. I agree to enrol myself/my child/my ward (as applicable) in \_\_\_\_\_, from \_\_\_\_\_.

I further agree that:

1. I **will abide by** the applicable **terms and conditions** as may be prescribed from time to time by the University, the relevant Faculties (including, without limitation, the University Scholars Programme, and the relevant organisations); and
2. I **will not hold** the University, its officers, or any of its full time or part time staff (including student assistants) **responsible or liable** in any way for, and that no right of action shall arise from, any loss or damage (including, without limitation, personal injury or property damage) caused by or sustained as a result of my/my child's/my ward's (as applicable) participation in the activities, whether through: (i) neglect on the part of the University, its officers or any of its full time or part time staff (including student assistants); or (ii) otherwise; and
3. I **will indemnify** the University and keep the University indemnified against all losses, claims, demands, actions, proceedings, damages, costs expenses, and any other liability arising in any way from my/my child's/my ward's (as applicable) participation in the activities or any breach of my/my child's/my ward's (as applicable) undertakings hereof.

**To be completed by all participants (regardless of age):**

Participant's Name: \_\_\_\_\_ Matric No: \_\_\_\_\_

Date: \_\_\_\_\_ Participant's Signature: \_\_\_\_\_

**To be completed by parents/legal guardians of applicants who are below 21 in age:**

Parent/Legal Guardian's Name: \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_

Parent/Legal Guardian's Address: \_\_\_\_\_

Date: \_\_\_\_\_ Contact No: \_\_\_\_\_