



SOUTH AFRICAN SCOUT ASSOCIATION

**GUARDIAN CONSENT AND INDEMNITY – JML ROTARY SCOUT
For adults 18 year of age and older**

To..... Skipper of JML Rotary Scout

I,, hereby request permission to take part in a sailing excursion on JML Rotary Scout to be held

from to

I hereby appoint and fully authorise the Skipper to consent to my undergoing surgical or medical treatment. I undertake to pay the cost of such treatment. I fully understand and accept that all activities are undertaken at my own risk.

I am aware that neither the Scout Association of South Africa nor its Scouters, agents, employees or 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 my person or property 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 may have to claim compensation against the Scout Association in respect of any loss, injury or damage incurred whilst engaged in any activity however 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: _____

Date: _____

Medical Aid Society _____

Medical Aid Number _____