

## CONSENT AND INDEMNITY

We, the undersigned (print full name of learner) .....  
Identity No.: .....

AND (IF THE STUDENT IS UNDER THE AGE OF MAJORITY)

Name of Parents/Guardian:

Father. .... ID: .....

Mother. .... ID: .....

Do each of us agree that: Name of Learner: .....

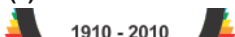
Participate in the activities of the “Be a Scientist for a Week” within the College of Agriculture, Engineering and Science at the University of KwaZulu-Natal, whether conducted at the University or extramurally including, but not limited to, studies, field trips, games, athletics, tours and excursions of general vocational, educational, historical, social or scientific interest, on the following conditions:

1. We fully understand and accept that participation in all such activities will be at our own risk.
2. We hereby authorise the University and its employees or agents to act on our behalf in respect of any circumstances pertaining to any accident or illness arising from, during, or in connection with such activities in the manner that the University, its employees, and agents in its absolute discretion deems fit. We fully accept full liability for all expenses incurred thereby or in connection therewith.
3. On behalf of ourselves, our heirs, and executors we hereby undertake to and hereby do, indemnify, absolve and hold harmless the University, its officers, its employees, agents, any person(s) acting on its behalf, or invitees against any loss in respect of all claims, proceedings, damages, costs and expenses whatsoever that may arise in the course of, or in connection with, such activities, howsoever arising, and whether as a result of negligence or otherwise.
4. I further undertake to comply with any rule or regulation relating to safety and/or the University's obligations under the Occupational Health and Safety Act or similar legislation as well as any reasonable instruction by any official of the University relating to the foregoing.
5. This indemnity will operate as a continuing indemnity and cover all periods of attendance as a learner at the “Be a scientist for a week” at the University.

College of Agriculture, Engineering and Science  
iKolishi lezoLimo, ubuNjiniyela kanye neSayensi

Postal Address: Private Bag X01, Scottsville, 3209, South Africa

Telephone: +27 (0)33 260 5420/5618/6116 Facsimile: +27 (0)33 260 6780 Email: sciencepmb@ukzn.ac.za Website: caes.ukzn.ac.za



1910 - 2010  
100 YEARS OF ACADEMIC EXCELLENCE

Founding Campuses: ■ Edgewood

■ Howard College

■ Medical School

■ Pietermaritzburg

■ Westville

SIGNED AT .....ON THIS ..... DAY OF.....20.....

AS WITNESSES

1.....

\_\_\_\_\_  
SIGNATURE OF LEARNER

2.....

\_\_\_\_\_  
DULY ASSISTED BY PARENT/GUARDIAN

SIGNED AT .....

ON THIS ..... DAY OF.....20.....

1.....

\_\_\_\_\_  
SIGNATURE OF PARENT / GUARDIAN

2.....

\_\_\_\_\_  
SIGNATURE OF PARENT / GUARDIAN

