



Cape Town, South Africa

Parent / Guardian Indemnity Form
Rite-of-Passage-Adventure Weekend to be held
[30 September - 02 October 2016]

- A. ***Boys-To-Men Cape Town Mentoring Network*** offers a program of personal growth for teen boys, which begins with a breakthrough weekend program and may continue with regular meetings of boys known as "J-Groups."
- B. The purpose of the J-Groups is to continue the work begun on the weekend, including the mentoring of the participating boy. J-Groups may also participate in active, recreational activities.
- C. The details of the location for the weekend event and timing for drop-off and pick-up will be communicated closer to the event.

This Indemnity Form, if signed, gives your consent for your child to participate fully and entirely in the Rite-of-Passage-Adventure Weekend, from Friday 30 September to Sunday 02 October 2016.

YOUR BOY'S INFORMATION

Boy's Name and Surname	
Boy's Date of Birth and Age	
Boy's Address	

Initial

YOUR BOY'S INFORMATION

Boy's Cell phone Number	
Boy's Home Telephone Number	
Boy's Email Address	
Name of School and Grade	
Boy's ID Number if available	

Please provide details of any Medical Issues (use an additional page if required)

Please specify any special dietary needs

Please detail any Emotional Issues (use an additional page if required)

PARENT / GUARDIAN INFORMATION

Initial

This Information will be treated confidentially

Parent / Guardian Name and Surname	
Relationship to Boy (mother, father, guardian)	
Address	
Parent / Guardian SA ID Number	
Parent / Guardian Mobile Number	
Parent / Guardian Home Tel. No.	
Medical Aid Scheme	
Medical Aid Number	
Name of General Practitioner (GP)	
GP Telephone Number	

INDEMNITY

Being the parent / legal guardian of the above participant, which capacity I warrant is correct, I hereby request you to allow him to take part in all the activities on the Boys to Men Rite-of-Passage weekend and any subsequent J-Group and by so doing further authorise **Boys-To-Men Cape Town** including all of their officers, directors, staff, leaders, co-leaders, volunteers, affiliates and all persons and entities acting for them or on their behalf to act in 'loco parentis' during the Weekend and any subsequent J-Group and to give any consent required by hospital or medical authorities in respect of medical attention they may in their sole discretion deem necessary. Furthermore, I hereby freely and voluntarily agree to release, indemnify, and hold Boys to Men - Cape Town harmless on behalf of myself, my children, my parents, my heirs, assigns, personal representatives and estate, as follows:

1. I hereby declare that I shall not hold Boys to Men - Cape Town liable for any damage or injury sustained by the above participant while on the trip to, during and back from the Weekend and any subsequent J-Group nor any consequential loss or losses sustained by him or me or any third party.
2. I understand and accept that the Weekend and any subsequent J-Group is a personal growth and development course and involves activities that carry unanticipated risks which could result in physical or emotional injury.
3. I also undertake to indemnify Boys to Men - Cape Town against all claims by me, or any third parties, arising from any cause or action whatsoever, and will not hold any of the above liable for any injury or loss or any damages consequent thereto, sustained whilst the above participant is in their care.
4. I accept that Boys to Men - Cape Town will take every reasonable precaution to ensure the safety of my child.

Signature of Parent /

Legal Guardian: _____ **Date:** _____

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This information will be treated confidentially