



# AR23

## LILYFONTEIN SCHOOL

### ADVENTURE RACE 2 SEPT. 2023



## LILYFONTEIN AR23 INDEMNITY FORM

**Please bring an original signed copy of this indemnity to registration. No signed indemnity = No race**

I hereby **apply / give permission** for **myself / my child** to participate in the Lilyfontein Adventure Race, organised by Lilyfontein School. I understand that the Lilyfontein Adventure Race includes adventure-based outdoor activities that can include, but are not limited to: Adventure courses run by the school, Trail Running, Mountain Biking, Tubing, Canoeing, Rock Climbing, Abseiling, Hiking, Horse Riding, Swimming/Paddling, Obstacle courses, Kloofing, High Ropes Courses.

I acknowledge that I am aware that these activities are potentially hazardous and the risk of personal injury or accident cannot be excluded. I further confirm that I am aware that some of these activities can be physically challenging. I confirm that I am/my child is physically well and fit and am/is able to participate in exercise of this nature without undue risk to my/his/her health. Should I/my child be unwell shortly before or on the day of the Lilyfontein Adventure Race, I undertake to take responsibility for ensuring that I/he/she will not participate. I further confirm that, should I/my child present with any flu-like symptoms or other symptoms indicative of Covid-19, I/my child will not participate in the event.

I accordingly hereby undertake and agree to indemnify Lilyfontein School, their organisers, partners, employees and any individual involved in assisting with the organisation, against any liability and any/all process and proceedings, claims, damages, interest, cost and/or expenses however arising which may result from any accident or injury to myself/my child or to my/his/her sports equipment/possessions, howsoever caused, and whether due to any act or omission by or on behalf of the aforesaid person. I undertake to ensure that I have enough medical and other insurance in place to meet any such cost, loss or injury.

\_\_\_\_\_

**TEAM NAME:** \_\_\_\_\_

Participant Full Name: \_\_\_\_\_

Signature (or parent's signature if under 21): \_\_\_\_\_

Full Name of parent if child under 21: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / 2023