

INDEMNITY FORM



To be completed by EVERY participant or their legal guardian (if under 18 years)
PLEASE NOTE: ONLY ONE PARTICIPANT PER FORM

COMPLETE IF FOR SELF:

I, (FULL NAMES), the undersigned, hereby confirm that I am a participant in a tour organised by Amanzi Trails CC. Date of birth:

COMPLETE IF FOR A MINOR:

I, (FULL NAMES), the undersigned, hereby confirm that I am the legal guardian of (FULL NAMES), a participant in a tour organised by Amanzi Trails CC. Date of birth:

I understand and accept that all tours are undertaken at each participant's own risk. I understand that it is an adventure tour and accept the risks involved, due to the nature thereof. I hereby indemnify, hold harmless and absolve Amanzi Trails CC and/or all its employees against and from any or all claims whatsoever that may arise in connection with any accidental loss or damage to the property of or personal injury to the participant aforesaid in the course of such a tour, excluding reckless and grossly negligent acts.

I understand that a valid passport is necessary and that as of 1 June 2015 an unabridged birth certificate together with applicable affidavits is also required for minors. I also understand that if I am not a South African citizen or have dual citizenship that I need to ensure that all my documentation is in order. (See General Information document).

ANY RELEVANT DIETARY REQUIREMENTS / MEDICAL CONDITIONS / ALLERGIES (IF APPLICABLE):

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I / my minor child can swim / cannot swim (Please tick the relevant case)

I / my minor child weighs less than 125 kg / weighs more than 125 kg (Please tick the relevant case)

TEL: (H): ; (W): ; (cell):

E-MAIL ADDRESS:

EMERGENCY CONTACT TEL NO.: RELATIONSHIP:

SIGNED AT (Town) on the DAY of 20.....

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SIGNATORY

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WITNESS 1

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WITNESS 2