 

**UCT SPORT AND RECREATION CONSENT ANDINDEMNITY**

The risk of injury is inherent during practice and competing in most forms of sport. The safety of each of our athletes are of utmost importance. Please acknowledge that certain sports needs prior critical capabilities, as identified by each individual UCT Sports Club before an athlete can practice or compete in it.; for example: all water sports; rock climbing; etc.

A duly signed consent and indemnity form by each athlete will be required prior to taking part in practices and competing in any form of sport and associated activities.

CONSENT AND INDEMNITY

*…………………………………………………………………………………………………………….* (Full names and surname)

*………………………………………………………………………………………………………………*

(Identity number or passport number)

I agree to participate in the sports and related activities of the University of Cape Town Sports Clubs, whether conducted at the University of Cape Town or extramurally.

1. I fully understand and accept that participation in all such activities will be at my own risk.

2. I hereby authorise the University of Cape Town and its employees or agents to act on my 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 of Cape Town, its employees, and agents in its absolute discretion deems fit. I fully accept full liability for all expenses incurred thereby or in connection therewith.

3. On behalf of myself, my heirs, and executors, I hereby indemnify, absolve and hold harmless the University of Cape Town , its officers, its employees, agents, and any person(s) acting on its behalf, against any loss, damage or injury whatsoever that may arise in the course of or in connection with such activities.

4. Nothing in this indemnity shalI exempt or limit liability in respect of bodily injury attributable to gross negligence.

Without detracting from the aforesaid:

I understand that the University does not take out insurance for this purpose on my behalf or my benefit.

* Medical

I have read the attached document regarding the UCT Benefit Scheme for Students. I note there is very limited benefits, available to me and any shortfall for whatsoever reason or nature will be covered by me.

I grant permission for medical treatment to be administered, and accept responsibility for such costs, which will be payable on request.

* Transport

I will not hold University or any employee of the University responsible and/or liable for any cost; damages and losses associated with when traveling to any location and also when traveling in vehicles which does not belong to the University and/or are not driven by University staff.

**UCT SPORT AND RECREATION INDEMNITY**

I confirm that I have read this consent and indemnity form and the UCT Benefit Scheme and that I understand the content and potential consequences thereof.

Signed: *………………………………*Date*: ……/………/…….* Witness: *…………………………*