



INDEMNITY FORM

I, the Parent/Guardian

Hereby indemnify St John's Preparatory School for Boys, the St John's Educational Trust, Hellenic Academy, Chisipite School Trust, its employees or agents and hold them harmless against all and any loss, damage, expense or cost which I may sustain during the period for which I am swimming arising from any cause whatsoever.

I understand that he/she will take part entirely at his/her own risk, and that while every precaution and care will be taken by the organiser(s), neither they, the Head/Principal, nor any member of staff will be held responsible for any accident, illness or any injury which may occur during, or as a result of the camp / festival / visit.

Further, I authorise the Representatives of the Smith Polo Camp to act "in loco parentis" and empower them to authorise any essential medical treatment which, for any reason may become necessary during the camp visit/tour and acknowledge that, the Smith Polo Camp is indemnified from any legal suit which may result from disputes or accidents involving my child.

Furthermore, I will abide by and adhere to all rules regulations and codes of conduct as set out by St John's Preparatory School for Boys, the St John's Educational Trust, Hellenic Academy and Chisipite School Trust.

Name: _____ Date: _____

Signature: _____

