



WA YOUNG SALESIANS Summer Camp (7-11 Jan)

January 2019

Indemnity Form

This declaration MUST BE SIGNED by the Camper's parent/ legal guardian.

Parent/Guardian Name:

Child's Name:

I give permission for my child to attend the WA Young Salesian Summer Camp in Nanga Bush Camp in Dwellingup on 7-11 January 2019.

- Indemnity:** I understand that while every reasonable precaution will be undertaken to ensure the protection of all campers, I hereby release the WA Young Salesian (WAYS) camp organisers and volunteers, from any and all liability whatsoever for any accident, illness, loss or damage of personal property that may occur to my child and/or my child's property during the camp activities that are connected with this application. I further indemnify the camp organisers against all loss, including legal expenses, connected with or arising from any claims or demands in relation to my child's attendance at the event.

- Medical Treatment consent:** I give permission for the WAYS camp organisers and volunteers to obtain emergency medical, hospital or ambulance assistance and/or treatment for my child as required. I acknowledge that I will be liable for any medical, hospital or ambulance expense incurred in my child's treatment and I agree to meet any expenses attached thereto.

- Privacy Declaration:** I also consent to a photograph or video image of myself/my child being used without acknowledgement, remuneration or compensation, in publications (print, websites, DVDs, CDs, etc.) and/or presentations of WAYS or the Catholic Archdiocese of Perth.

- Transport Consent:** I give permission for my child to travel by bus to and from the WA Young Salesian Summer Camp at Nanga Bush Camp in Dwellingup during the period listed above. Although every precaution will be taken to ensure your child's safety, I further agree that WAYS, its staff and volunteers will not be held liable for any accident as a result of transporting your child.

Parent/Legal Guardian's Signature:

Date