



CONSENT CERTIFICATE

PLEASE PRINT

To: The Scouters of 2nd Boksburg (St Michael's) Scout Group.

I, (Full name of legal Guardian) _____

Of (Address) _____

Postal Code _____

Tel No: (____) _____ Cell No: _____

being the Legal Guardian of (Ward's full name) _____

hereby make formal application for my ward to take part in the activities
connected with the _____ held at _____ from
____/____/2010 to ____/____/2010.



I hereby appoint and authorize the Scouter in charge to act in
my place as guardian with full authority to consent to my ward
undergoing surgical or other medical treatment. I undertake to
pay the cost of such treatment.

I fully understand and accept that all activities are undertaken
at my ward's own risk.

I am aware that neither the South African Scout Association nor
its Scouters accept responsibility for any loss, injury or damage that the person
or property of my ward may sustain whilst engaged in any Scouting activity and I
waive any right that I or my ward may have to claim compensation against the
South African Scout Association or any of its Scouters or other members in
respect of loss, injury or damage incurred whilst engaged in any Scouting activity
howsoever arising and I indemnify them against all
claims.

Signed: _____
(Legal Guardian)

Witness: _____
(Not Spouse)



Date: _____ day of _____ 2010.

HEALTH CERTIFICATE

PLEASE PRINT

I certify that, to the best of my knowledge, my ward _____

A) Is not suffering from any physical disability or illness which makes it
inadvisable to attend Camp, but I wish to draw your attention to the
following :-

B) Is not suffering from an infectious disease, and has not been in contact with
anyone so suffering during the past 14 days.

C) I do/do not give my permission for him to take part in any swimming
activities.

D) Name of Medical Aid: _____

Member's Medical Aid Number: _____

Name of Member: _____

Id Number of Member: _____

E) Name of Doctor: _____ Doctor's phone number: _____

Signed: _____

(Legal Guardian)

Telephone: (H) _____

(W) _____

(Cell) _____

Dated this _____ day of _____ 2010.

