



PARENTAL CONSENT AND INDEMNIFICATION FORM

I, (Full name of parent/legal guardian) _____

Father/Mother/Legal Guardian (*circle appropriate option*)

Of (Full name of child) _____

ID Number (of child) _____

Residing at (Full address) _____

Fully understand and hereby consent to the risks associated by my child training, practicing, participating or playing in any way, in Club U20 or Community level U20 rugby only, and in the non-front row position(s) applied for (Rugby Activities). I fully understand that the Rugby Activities involve risks and dangers of serious bodily injury, including permanent bodily injuries. These risks may be caused by my child's own actions, or inactions, the actions or inactions of others participating in the Rugby Activities. I also understand that all such Rugby Activities are undertaken by my child at his own risk. I fully consent to my child participating in Rugby Activities during and in preparation for all and any of the above-mentioned Club U20 or Community level U20 rugby competitions only.

I am aware and accept that neither the South African Rugby Union and _____ Provincial Rugby Union, nor its owner(s), directors, agents, officers, volunteers, and employees, other participants, any sponsors and advertisers, and, if applicable, owners and lessors of premises on which the Rugby Activities take place, accept any responsibility for any loss, injury or damage that my child may sustain whilst taking part in any Rugby Activity.

I waive any right that I or my child may claim compensation against any of the aforementioned parties in respect of any loss, injury or damage incurred whilst taking part in the rugby Activities whether as a result of negligence or otherwise and I indemnify them against all claims.



Parent/Legal Guardian Signature

Date Signed

Full Names: _____

ID Number: _____

Capacity: _____

Witness Signature

Witness Signature