

INDEMNITY FORM PlayTopia

I/We _____ (full names and surname) being the Parent(s)/guardian of _____ (full names and surname of child) hereby:

1. Agree to accept and abide by all the terms and conditions governing PlayTopia with I declare myself fully acquainted
2. Agree that while I accept that PlayTopia will take every reasonable precaution against harm or loss occurring, Indemnify PlayTopia and/or their staff, agents or employees against all loss or damage, whether to person or property, from any cause howsoever arising, which may be sustained by the pupil stipulated above or to his/her property or possessions, whilst on the school property or under school control during any school excursion, sporting activity or outing
3. Agree that in emergency circumstances the Principal of PlayTopia or his/her representative has the power to authorize whatever treatment, he/she in their sole discretion deems necessary for the pupil, and in doing so agree that the principal and or her representative shall act loco parentis.
4. I agree further that I shall be responsible for the payment of all medical and/or hospital accounts, where applicable, should any injury be sustained to the pupil stipulated above whilst on the school property, or under school control during any school excursion, sporting activity or outing.
5. Agree to ensure that the child has been properly immunized against diphtheria, tetanus, and polio, and vaccinated against tuberculosis, and will furnish the necessary proof upon enrolment.
6. Agree that the principal, or in her absence any other responsible person, may administer an analgesic preparation of the correct dosage for the purpose of reducing an elevation in temperature or for pain if they have been unable to contact me
7. Agree that this indemnity shall commence on the date of signature hereof and shall remain in force and be of effect for the duration of the pupil's enrolment at PlayTopia. Agree to abide by all the school regulations and to settle all fees monthly in advance over 12 months and to give at least one month's written notice of my intention to terminate the agreement of enrolment.

Signed at _____ on this _____ day of _____ 20 _____

Parent/Guardian: _____ Parent/Guardian: _____