

# **THE EDUCARE CENTRE**

**AT 16 BURLINGTON DRIVE**

## **CONSENT AND INDEMNITY**

I, \_\_\_\_\_  
(FULL NAME OF PARENT / GUARDIAN)

I.D.NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

The parent / guardian of: \_\_\_\_\_  
(FULL NAME OF CHILD / WARD)

born on : \_\_\_\_\_  
(BIRTHDATE OF CHILD / WARD)

Hereby give consent for my child to attend the Educare facility at 16 Burlington Drive, Westville during the Covid-19 pandemic and give my consent for the aforesaid child/ward to take part in any activities arranged by Educare. I understand and acknowledge that my child shall participate in all activities at my own risk.

I undertake to indemnify, hold harmless and absolve Westville Senior Primary School, the Principal, the Governing body and the Educare staff from any or all claims which may arise in connection with my child contracting the Coronavirus while attending Educare.

I acknowledge that the persons mentioned herein shall take all responsible precautions to ensure the safety of my child during this pandemic. I further acknowledge that I have read and fully understood the contents of this document.

Dated at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2020

\_\_\_\_\_  
Signature of parent / guardian

Witnesses:

1. \_\_\_\_\_

2. \_\_\_\_\_