



LETTER OF WAIVER AND INDEMNITY (ACTIVITY PARTICIPATION)

To: Church of St Mary of the Angels

LETTER OF WAIVER AND INDEMNITY TO CHURCH OF ST MARY OF THE ANGELS ("St Mary's")

| | | | |
|-------------|--|-----------|--|
| Activity: | | | |
| Start Date: | | End Date: | |
| Venue: | | | |

Dear Sirs,

1. I, [name of participant] _____,
NRIC/FIN/Passport No. [last 4 characters (XXXX)] _____, wish to participate in the Activity.
2. I warrant that I am in good health and have no physical condition that would endanger my life while participating in the Activity.
3. Whilst reasonable precaution will be taken by St Mary's and/or its agent/s to ensure the safety of participants, I understand that I take part in the Activity as a participant at my own risk. I confirm and agree that St Mary's and/or its agent/s will not be held liable by me for any personal injury or death arising from my participation in the Activity or for any loss of or damage to my property arising from my participation in the Activity, except for such injury or death that is caused directly by St Mary's or its agent/s' gross negligence.
4. In consideration of St Mary's allowing me to participate in the Activity, I undertake that if, in the course of the Activity, I deliberately or negligently cause any injury (whether fatal or otherwise) to any person or any damage to or loss of any property of any person, I shall indemnify St Mary's if that suffering person makes claims or takes actions against St Mary's or St Mary's has to pay for costs or expenses.
5. I represent that I am at least 21 years of age; or that, if I am under 21, my parent / legal guardian has signed on Page 2.

Yours faithfully,

[Signature of Participant]

[Date]

Name: _____

NRIC/FIN/PP No: _____ [last 4 characters (XXXX)]

In case of emergency, please contact: Name: _____ Mobile No.: _____

Relationship: _____



CHURCH OF ST MARY OF THE ANGELS

PARENT CONSENT (To be completed by Parent / Guardian)

I, [name of parent / guardian] _____
NRIC/FIN/Passport No. [last 4 characters (XXXX)] _____ am the parent / guardian of
the above-named [name of child / ward] _____. I consent to my child / ward taking
part in the Activity, and I agree to the waiver and indemnity that are set out in this document.

[Signature of Parent / Guardian]

[Date]

Name: _____

NRIC/FIN/PP No: _____ [last 4 characters (XXXX)]

In case of emergency, please contact: Name: _____ Mobile No.: _____

Relationship: _____