**Indemnity Form**

|  |  |
| --- | --- |
| I wish to join the |  **SIM UOL Freshmen Orientation Camp FOC 2** |
| organised by |  **SIM UOL SRC/Student Development** | from |
| **01 August 2016** | to | **03 August 2016** | and abide by the Rules and Regulations set by both the |

Singapore Institute of Management Global Education (SIM GE) and the SIM GE CCA Club/Student Council event organising committee. I am fully aware of the possible risks involved and accept the same, notwithstanding the fact that this trip/camp/training/activity is intended only for those without medical problems and who are fit enough to indulge in physical activities. I confirm that I am enrolling on my own volition and I shall not hold the SIM GE, its servants and organisers responsible or in any way liable for my death, injury, disability or any loss or damage whatsoever arising from any cause in connection with the trip / camp / training / activity or my participation therein.

I hereby indemnify and agree to keep SIM GE, its management, servants and organisers of the event fully indemnified against all claims, loss or damage whatsoever in respect of death, injury, disability or any loss or damage whatsoever arising from any cause in connection with the trip /camp / training / activity or my participation therein.

I also agree to allow SIM GE to disclose my personal information to its service providers in connection with the trip/camp/training/activity.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| **Participant’s Name****(as in NRIC/Passport)** |  | **Student / NRIC / FIN No.** |  | **Signature** |  | **Date** |
|  |  |  |  |  |  |  |
| **Parent’s / Guardian’s consent for participants below 21 years of age on date of the enrolment**  |
| **Parent’s / Guardian’s Name****(as in NRIC/Passport)** |  | **NRIC / Passport No.** |  | **Signature** |  | **Date** |