
BADMINTON SOUTH AFRICA - INDEMNITY FORM (Seniors)

I, the undermentioned tour member, hereby undertake to participate in the undermentioned tour/tournament at own risk and in accordance with the tour management's arrangements:

Tour member (full names and surname):

Tour/tournament:

at _____ from _____ to _____

I undertake on behalf of myself, my executors, my spouse and children, to indemnify, hold blameless and absolve Badminton South Africa and its coaches and managers, against and from any or all claims whatsoever that may arise in connection with any loss of or damage to property, or injury to my person, in the course of the tour, in the knowledge that those in charge will nevertheless take all reasonable precautions for my safety and welfare. Badminton South Africa is empowered to use its own discretion regarding any situation that may arise during the tour.

Tour Member Signature And Date

Witness

Address

Cell

Work

MEDICAL AID NAME & MEMBERSHIP NUMBER:

Please answer questions (if necessary, with annexures):

Are there any types of food or medicine to which you are allergic?

Have you suffered from any serious illnesses or allergies recently?

Is there anything regarding yourself that you feel the coach or manager should know? (Prescription medicine, etc)