



## Declaration

- 0 In the event of an accident, injury or emergency, the Director, Principal, Nurse or any person in charge of the school, shall have full authority to take the requisite decision to ensure appropriate emergency medical treatment of my child by the school Nurse or if necessary, at any hospital/clinic, if I cannot be reached on the emergency numbers provided to the school by me, in the event of an accident, injury, incident or emergency the Director, Principal or any other nominated staff member in charge at the time shall have full authority to act in 'loco parentis' and take reasonable requisite decision to ensure appropriate medical treatment is given to my child initially in the school and if deemed necessary at any hospital or clinic.
  
- 0 I agree to fully absolve the Preschool, and/ or its Director, Principal, Gym Coach, Supervisor, teaching staff, officials , and/or its voluntary helpers of any wrongdoing and to keep them fully and effectively indemnified against all actions, claims, liabilities, damages, expenses, costs, charges, fees (including medical fees, judicial and attorney's fees) suffered as a consequence of any incident, injury or condition or virus/disease contracted by my child whilst on field trips organized by the Preschool, or during travel on the means of transportation provided by the school, or in the school premises provided that the school strictly adheres and follows the standard guidelines, policies and practices outlined in the school Policy manual, which has been read and understood by me.
  
- 0 I agree to indemnify and keep indemnified The school for any loss or damage caused by me or by my child to the school property.

I have fully read and understood the content of this declaration and undertake to abide by the same, I further declare that the information provided above is true and correct.

Parent Name: .....  
Parent Sign: .....  
For Official use only: .....  
Date of submission: .....