

## ACTIVITY CONSENT FORM AND APPROVAL BY PARENTS

This form is recommended for use to obtain approval and consent for students at Honsbridge International and guests (if applicable) to participate in physical education activities, field trip or extra curricular activity. It is recommended that the parents keep a copy of the form and contact the teacher in charge in the event of any questions or in case of emergency contact is needed.

First name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_

Birth date(day/month/year) \_\_\_\_\_ Age during activity \_\_\_\_\_

has approval to participate in the Physical Education Enrichment Activity  
(Name of activity)

from \_\_\_\_\_ to \_\_\_\_\_  
(Date) (Date)

Special considerations or restrictions: \_\_\_\_\_

I understand that participation in the activity involves a certain degree of risk. I have carefully considered the risk involved and have given consent for myself or my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct.

In consideration of the organisers, I hereby agree to waive all my rights to any claim for personal injury, death and all other losses or damages that may be sustained before or during and after the activity. I further undertake to indemnify you and keep you indemnified against any claims that may be brought to you in respect of the above.

\_\_\_\_\_  
Full name and signature of participant  
Or parent of participant below 18yrs old

\_\_\_\_\_  
Date

Parent/Guardian's name \_\_\_\_\_

Parent/Guardian's contact no \_\_\_\_\_

Contact the teacher(s) in charge with any questions:

Name Emma Furze

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Name Dominic Hon

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