

YOUTH WITH A MISSION *Muizenberg*

Partnership Agreement



Applicant Name:

School Name & Start Date:

Waiver and Release of Liability

I do hereby release Youth With A Mission, its agents, employees, and volunteer assistants from any liability whatsoever arising out of any injury, damage, or loss which may be sustained by myself or other persons during my course of involvement with Youth With A Mission.

Signature: _____

Date (DD/MM/YYYY): _____

Consent for Treatment

In the event of an emergency in which I am rendered unconscious and my nearest responsible relative or guardian cannot be contacted, I hereby agree to such treatment, anesthetics, and operations to be performed upon myself as in the opinion of the attending physician(s) is deemed necessary.

Signature: _____

Date (DD/MM/YYYY): _____

Financial Responsibility

I confirm that I have read and understand the YWAM Muizenberg Financial Policy. I understand and accept that the payment of the required school fees must be made prior to or at registration, unless otherwise approved in writing by the Training Director before my arrival in Muizenberg. Further, I take full responsibility and agree to meet prior to the completion of the school all personal expenses incurred during my involvement with Youth With A Mission.

Signature: _____

Date (DD/MM/YYYY): _____

Declaration

I declare that all information that I have supplied in my application is true, accurate, and complete to the best of my knowledge.

Signature: _____

Date (DD/MM/YYYY): _____

If the applicant is under 18 years of age, then the signature of a parent/guardian is also required.

Parent Guardian Name:

Relation:

Signature:

Date: