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| RTS Logo**Registration: 2012\003340\07** |  RTS Logo  |

**Indemnity Declaration**

I/We\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Full names and surnames

The parent(s)/guardian(s) (delete which is not applicable) of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (child’s name # 1);

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (child’s name #2)

Hereby consent to my child/ren’s use of the services of Ruben’s Transport as set out in the Ruben’s Transport Terms & Conditions.

I confirm that the minor child/ren’s general health is good and that all relevant ailments and allergies have been disclosed to Ruben’s Transport in writing, and should any ailments or allergies arise in the future, will immediately be notified to Ruben’s Transport in writing.

I confirm that the use of the Service is entirely voluntary and I accept all risks involved therein.

Accordingly, Ruben’s Transport and its Drivers shall NOT be liable for any loss, damage, injury or illness of whatsoever nature and howsoever caused, suffered by me or the minor child as result, directly or indirectly, of using the Service.

I hereby indemnify Ruben’s Transport and its Drivers, from any loss, damage, injury suffered by me and/or the aforementioned child arising from or incidental to the use of the Service.

I warrant that I am authorized to give this indemnity, and confirm that I have read the Ruben’s Transport terms and conditions, and consider myself bound thereto.

Signed at Johannesburg, \_\_\_\_\_\_\_\_\_\_\_\_\_on this the\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_\_\_\_\_

Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Identity Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*BY SIGNATURE YOU CONFIRM THAT YOU HAVE READ AND AGREE TO THE RUBEN’S TRANSPORT TERMS AND CONDITIONS.