

DISCLAIMER FOR CHILDREN AND YOUNG PEOPLE AGED 6-17 YEARS

I, the undersigned Born on In
Resident in In the street N.
Cell phone number Document number Expiry date

I DECLARE AS PARENT/LEGAL GUARDIAN

TO RELEASE THE STAFF FROM ANY LIABILITY FOR ANY DAMAGE AND/OR INJURY CAUSED OR SUFFERED BY THE CHILD IN THE COURSE OF THE ACTIVITIES

Name and surname Date of birth Age

FURTHER, I DECLARE THAT

- | | |
|---|--|
| <input type="checkbox"/> I authorise the publication of photos and audiovisual material | <input type="checkbox"/> I do not authorise the publication of photos and audiovisual material |
| <input type="checkbox"/> The child can leave the library alone | <input type="checkbox"/> The child cannot leave the library alone |
| <input type="checkbox"/> The child does not need an accompanying person | <input type="checkbox"/> The child needs an accompanying person |

PROXY TO COLLECT THE CHILD

Mr/Mrs Document Number Expiry date

Please attach a copy of your identity document and that of your proxy, if indicated. Expiry date of proxy: 31 December 2022

DATE SIGN
(parent/guardian applicant)