



Dear Parent/Guardian

Urban Waste Management is striving to create awareness of the cause and effect of poor waste management behaviour. At the same time it continues involving people in efforts to minimise the health and environmental impact by encouraging waste avoidance and waste diversion. Educators, learners and their families are important partners in the City's efforts to do so, and it therefore offers learners the opportunity to visit one of its integrated waste management facilities to experience the waste stream journey and be part of the waste solution.

1. SAFETY RULES FOR VISITORS TO THE WASTE MANAGEMENT FACILITY

Visits to the facility will take place under the guidance of trained staff. Since it is an operational site, it has stringent safety rules and regulations. All visitors will have to adhere to these rules, and sign an indemnity form.

- Wear closed, non-slip shoes.
- You will be issued with a bib. Wear it at all times, and return it after your tour of the plant.
- Stay in your group with your guide, and do not stray or run around.
- Listen to your guide.

I, _____, the undersigned (full name of parent/guardian), parent/guardian of _____ (full name of child), hereby grant permission for my child to participate in the excursion/visit conducted by the City of Cape Town's Urban Waste Management Department at the facility on _____ (date).

Parent/guardian (work or other): _____
Cell: _____

2. EMERGENCY CONTACT DETAILS

In the event of an emergency please contact _____ (full name and surname) at _____ (contact details). Please indicate any medical conditions that the City staff should be aware of, if any (e.g. epilepsy, allergies, etc.):

3. PARENTAL CONSENT AND INDEMNITY

I consent to my child taking part in this excursion.

I fully understand and accept that all activities are undertaken at my child's own risk.

I am aware that neither the City of Cape Town nor its staff or agents accept responsibility for any loss, injury or damage that the person or property of my child may sustain while participating in the excursion/visit, and waive any right my child or I may have to claim compensation from the City of Cape Town, its staff or agents in respect of any loss, injury or damage incurred while engaged in the excursion/visit, howsoever arising and whether as a result of negligence or otherwise. I hereby indemnify them against any and all claims which may arise out of the excursion.

Signed at _____ on this _____ day of _____ 20_____

Signature of witnesses

Witness 1: _____

Witness 2: _____

4. PROTECTION OF PERSONAL INFORMATION

The City acknowledges that, for the purposes of this consent form, it may come into contact with or have access to personal information and other information that may be classified or deemed as private or confidential and for which the parent/guardian is responsible in terms of the Protection of Personal Information Act (POPIA). Such personal information may also be deemed or considered as private and confidential as it relates to POPIA. The parent/guardian consents to the collection and processing of the personal information in terms of POPIA. This Information will only be used in the event of an accident/incident during the tour.

The City confirms that it will at all times comply with POPIA and that it will only collect, use and process personal information it comes into contact with pursuant to this agreement in a lawful manner, and only to the extent required to execute the services. The City agrees that it will notify the parent/guardian immediately where there are reasonable grounds to believe that the personal information of a data subject has been accessed or acquired by any unauthorised person.

Unless so required by law, the City agrees that it will treat the personal information as confidential and further not disclose any personal information as defined in POPIA to any third party without the prior written consent of the parent/guardian.

The parent/guardian hereby indemnifies and holds the City harmless against all claims, losses, damages and costs of whatsoever nature suffered by the parent/guardian arising from non-compliance with applicable data protection laws and/or other legislation.

Transport indemnity form

If City transport is provided, please complete Annexure 12: transport indemnity form for passengers.

I, the undersigned (full name and surname in block letters)

_____, identity
number _____, parent/guardian of
_____ (name of child) travelling as a passenger in a motor
vehicle or other mode of City transport, hereby indemnify, release and discharge the City, its
Council, Council members, staff members, officials and other persons authorised by the City
from all liability arising from claims that I as parent/guardian may have for any injury (including
injury resulting in death), however caused, sustained by my child and for loss of or damage,
however caused, to my child's personal belongings suffered at any time during the course of
his/her transportation as a passenger in a motor vehicle or other mode of City transport.

Signed at _____ on this _____ day of _____
20_____

Signature of witnesses

Witness 1: _____

Witness 2: _____

Amended on:
20/09/2022