All Hands on Deck Maritime Training

www.allhandsondeck.com.au

Certificate of Indemnity

This is to certify that ……/……

Insert name of trainee. Parent/Guardian/Carer

(Include name of Parent/Guardian/Carer if the **trainee is under** 18 years of age)

of address……

hereby indemnify and exonerate All Hands on Deck Maritime Training, its partners, servants, agents and/or representatives against any damages, claims and/or liabilities whatsoever and however arising whilst undertaking training in all or any training courses or programs, including while undertaking any excursions or field trips during all or any training courses or programs that the abovementioned person has enrolled in with All Hands on Deck Maritime Training.

I hereby state that I have read and understand the above indemnity conditions and I also agree to the conditions of enrolment of All Hands on Deck Maritime Training as listed below:

- I agree to photographs relating to the training course or program being taken and to the publication of these photographs
- I agree to my performance and assessment details being provided to the relevant Government authority

NOTE: Please delete if there is any objection to the above conditions

Signed……	Witness……..
Print Full Name:……	Print Full Name:……
Date:……..	Date:…….