



NASIONALE SEE-EN-SAND INSTITUUT



2025 ENTRY / INDEMNITY FORM

See-en-Sand and its personnel do not accept responsibility for any fatalities, injuries, illness, or loss of personal property that may occur during the camp/course/expedition. I, the undersigned, agree to all terms and conditions and accept the above and hereby apply for the following See-en-Sand course

March/April Lifesaving Selection Course Students must be 16 years to legally perform lifesaving duties	R5 500.00	30 March – 5 April 2025
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Full Name + Surname		
ID Number		
Age on 31 December 2025		
Student Cell		
E-mail for official comms		
Attended <u>previous</u> courses? Confirm year(s)	Weekend Camp / Date	Lifesaving Course / Date
Hometown		
Name of School		
Medical Aid Name + No.		
Any medical conditions or allergies?		
Parent Name + Cellphone No.		
Signature: student		
Signature: parent/guardian		
Date		

Tel +27 (0)28 314 0252 • Cell 084 484 0654 (Henk) • Prawn Flats, Hermanus, 7200, South Africa
•sparks@hermanus.co.za • www.see-en-sand.co.za •

- No entry will be accepted without parent signature if student is under 18.
- This original printed and signed form and student data form must be handed in by participant on arrival at our campsite
- To enter please send completed entry form and POP by e-mail to sparks@hermanus.co.za.
- **Banking details:** See en Sand, Nedbank, Branch code 198765, Account number 1470019787, Ref Surname/Initial
 - Please email your POP to sparks@hermanus.co.za
- **Refund and cancellation policy:**
 - Please refer to our "Policies, NB info and What to Bring" document
- **Please note that we have a strict zero alcohol, drug, and smoking/vape policy. Should a student be suspected or found with any of these substances, we will immediately contact his or her parents/guardian and they will be requested to leave the camp immediately and without a refund.**
- During our courses, we may take photographs/videos of the learners and may use these images on our social media channels, as well as on our website. From time to time, our programme may be visited by the media who will take photographs or film footage of specific activities. To comply with The Protection of Personal Information Act, and by signing this entry/indemnity form, you grant your permission for your child to appear in above mentioned photographs/videos. Please discuss with us if you have any queries.
- By signing this document, all parties agree to the above conditions.

STUDENT DATA FORM

Please complete, only where marked with an X, and insert a physical/digital head-and-shoulders photo in the "Team" block

Name + Surname:	x
Cell No:	x
Year of previous lifesaving course(s) if applicable	x
Age on 31 December 2024	x
School	x

TEAM:

PRACTICAL TESTS						
		TIME	PLACE	YES	NO	COMMENTS
1.	RUN					
2.	SWIM					
3.	RUN/SWIM/RUN					
4.	MARATHON					
5.	BUOY BIND					
6.	BEACH SIMULATION					
7.	DREUNKRANS					
8.	RESCUE TECHNIQUES					
9.	CPR					
10.	CURRENT TRAINING					
11.	"GAP" TRAINING					
12.	PARTICIPATION					

KNOWLEDGE QUESTIONNAIRE		
	MARK %	COMMENTS
TEST		

FEEDBACK

PRACTICAL: _____

KNOWLEDGE QUESTIONNAIRE: _____

GENERAL: _____

COMPETENT:

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">YES</td> <td style="width: 50%; text-align: center;">NO</td> </tr> </table>	YES	NO	<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> DATE: </div>	STUDENT:	<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 90%;"> INSTRUCTOR: </div>
YES	NO				

UNIFORM + SIZE	Hat	T-SHIRT	SHORTS	LONG PANTS	LONG SLEEVE	JACKET