

CAPE TOWN OFFICE

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reference **Hikers Indemnity**
date **03 November 2025**

HIKERS INDEMNITY FORM

ACTIVITY: _____
VENUE / LOCATION: _____
DATE OF ACTIVITY: _____
I, (Full Name) _____
ID Number (if applicable): _____
Company Name (if applicable): _____
On behalf of (if commissioned): _____

hereby declare and undertake the following:

1. Legal Compliance

I shall conduct the above activity in full compliance with:

- The National Forests Act 84 of 1998, as amended;
- The Nature Conservation Ordinance 19 of 1974;
- The NEM: Protected Areas Act 57 of 2003;
- The NEM: Biodiversity Act 10 of 2004;
- Western Cape Biodiversity Act 6 of 2021;
- All applicable municipal by-laws and CapeNature conditions of approval.

2. Conduct and Responsibility

- I shall adhere to all reserve-specific rules and instructions issued by CapeNature or its representatives.
- I accept personal responsibility for my conduct and any damage, injury, or loss arising from my actions or omissions.
- I shall ensure the safety and well-being of all participants under my supervision.

3. Indemnity and Risk Acknowledgement

- I waive all claims against CapeNature, its employees, agents, and successors for loss, damage, injury, or death, even if caused by negligence of CapeNature, its employees, agents, and successors,
- I accept full responsibility for risk assessment, emergency response, and rescue costs, including air evacuation if necessary.

The Western Cape Nature Conservation Board trading as **CapeNature**

Board Members: Ms Marguerite Loubser (Chairperson), Prof Gavin Maneveldt (Vice Chairperson), Mr Tom Blok, Ms Reyhana Gani, Dr Colin Johnson, Ms Ayanda Mvandaba, Prof Nicolaas Olivier, Ms Chwayita Shude-Mareka, Dr Razeena Omar

4. Environmental and Operational Obligations

- I shall uphold the Leave No Trace principle and ensure all waste is removed.

I shall not:

- Light fires or use flammable substances without written permission.
- Introduce or remove any flora, fauna, or geological items.
- Disturb wildlife, archaeological, or geological features.
- Exceed acceptable noise levels.

5. CapeNature's Rights

CapeNature reserves the right to cancel or withdraw approval without liability if:

- The activity differs from the approved description.
- Safety or legal obligations are not met.
- Participant numbers exceed the approved limit.
- Any terms of this indemnity are breached.
- Circumstances beyond CapeNature's control arise (e.g., fire, extreme weather, force majeure).
- In the case of a cancellation, any deposit paid to CapeNature shall be refunded unless cancellation is related to acts or omissions on your part.

6. Acknowledgement and Authority

- I acknowledge that failure to comply may result in future exclusion from CapeNature-managed areas.
- I confirm I am duly authorised to sign this indemnity on behalf of myself or the organisation I represent.
- I confirm that my personal information may be processed in line with the Protection of Personal Information Act (Act 4 of 2013).

SIGNATURE: _____

DATE: _____

WITNESS

Full Name: _____

Signature: _____

Date: _____

EMERGENCY CONTACT DETAILS

Name: _____

Relationship: _____

Phone Number: _____

Alternative Number: _____