

# Golden Bay High School

## Indemnity Document for Students living with a Designated Caregiver.

I/We acknowledge that I/we have decided to place our/my child within the care of a caregiver vetted and monitored by myself/ ourselves in order for them to attend Golden Bay High School as an International Fee Paying student. Accordingly, I/we take full responsibility and accept the decisions made by my/our designated caregiver about the day-to-day requirements of my/our child. S/He will attend Golden Bay High School for .....terms from ..... to .....

Students name (as it appears on the passport) .....

Caregiver's name: ..... Phone.....

Caregiver's address: .....

.....

Should this arrangement change I/we undertake to inform the school immediately. Further, I/we understand that should Golden Bay High School have any concerns regarding the welfare of my/our child they may refer that child to the relevant welfare authorities, or any other appropriate agency in New Zealand.

I/We take full responsibility for placing my/our child with the designated caregiver named above and I/we understand that Golden Bay High School will make every endeavour to provide care and welfare of my/our child while studying in their school.

***NB. The School will visit the home prior to enrolment in order to meet with the caregiver/s and establish a communication arrangement with them. The school will ensure that the selected accommodation is satisfactory. The school will interview the student at least once a term to monitor his/her on-going well-being. The school may require a Police vet be undertaken if it considers it appropriate.***

I/We have placed my/our child in the care of their caregiver.

Signed: ..... Date: .....

*(Must be signed by student's Father, Mother or Legal Guardian, only)*

Print Name: Mr/Mrs .....

Contact Phone in Home Country: .....

Contact address in Home Country: .....

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Email Address: .....