

Medical Authorisation & Indemnity Form

FOR ASIAN NURSING SCHOLARSHIP (ANS) SCHOLARS ONLY.

Instructions:

1. Section A should be completed by the Scholar. Where the Scholar is below 21 years of age, Section B should also be completed by a Parent/Legal Guardian of the Scholar.
2. This form must be completed and returned together with a copy of the Parent's/Legal Guardian's identity document (Identity Card). Legal Guardians should be at least 21 years of age.
3. For items with a *, please delete where appropriate.

Section A: To be completed by the Scholar

I, _____ (Name) _____ (Identity Card) (the "**Scholar**") hereby:

1. agree and acknowledge that:
 - (a) I may be required to, and shall undergo pre-medical health screening, vaccinations and/or medical treatments for various medical conditions or diseases (the "**Services**"), including, but not limited to, Human Immunodeficiency Virus (HIV), Hepatitis B, Hepatitis C, Tuberculosis and blood disorder pursuant to:
 - (i) any rule, guideline, policy, direction or instruction for course enrolment and/or application of student pass (as the case may be) of the polytechnic I will be enrolled in, the Ministry of Health ("**MOH**") and/or the Immigration Checkpoint Authority ("**ICA**"); and/or
 - (ii) any rule, guideline, policy, direction or instruction of MOH Holdings Pte Ltd ("**MOHH**") and/or any organisation or institution related to MOHH ("**MOHH Affiliate**"); and
 - (b) the vaccination(s) may result in common side effects, including, but not limited to, mild pain, swelling and/or redness at the vaccination site, and slight fever on some occasions;
2. consent and authorise MOHH's appointed medical vendor(s) to provide me with the Services;
3. agree that I shall not hold MOHH, the MOHH Affiliates, and/or any of MOHH's or MOHH Affiliates' directors, employees and/or agents (the "**Indemnitees**") responsible or liable in any way, and no right of action shall arise from any loss or damage (including, without limitation and to the extent permissible by law, illness, personal injury, loss of life or property damage) that may be caused by or sustained as a result of the performance or non-performance of the Services on me; and
4. indemnify and keep harmless the Indemnitees from and against all losses, claims, demands, actions, proceedings, damages, costs or expenses (including legal fees) and any other liability arising in any way from the performance or non-performance of the Services on me.

Scholar's Signature

Date

Section B: To be completed by the Parent/Legal Guardian of the Scholar (if Scholar is below 21 years of age)

I, _____ (Name of Parent/Legal Guardian*) _____ (Identity Card), the Father/Mother/Legal Guardian* of the above-named Scholar hereby:

1. agree and acknowledge that:
 - (a) the Scholar may be required to, and shall undergo the Services, including, but not limited to, Human Immunodeficiency Virus (HIV), Hepatitis B, Hepatitis C, Tuberculosis and blood disorder pursuant to:
 - (i) any rule, guideline, policy, direction or instruction for course enrolment and/or application of student pass (as the case may be) of the polytechnic the Scholar will be enrolled in, MOH and/or the ICA; and/or
 - (ii) any rule, guideline, policy, direction or instruction of MOHH and/or any MOHH Affiliate; and
 - (b) the vaccination(s) may result in common side effects, including, but not limited to, mild pain, swelling and/or redness at the vaccination site, and slight fever on some occasions;
2. consent and authorise MOHH's appointed medical vendor(s) to provide the Scholar with the Services;
3. agree that I shall not, whether on behalf of the Scholar or in my own right, hold the Indemnites responsible or liable in any way, and no right of action shall arise from any loss or damage (including, without limitation and to the extent permissible by law, illness, personal injury, loss of life or property damage) that may be caused by or sustained as a result of the performance or non-performance of the Services on the Scholar; and
4. indemnify and keep harmless the Indemnites from and against all losses, claims, demands, actions, proceedings, damages, costs or expenses (including legal fees) and any other liability arising in any way from the performance or non-performance of the Services on the Scholar.

Parent's/Legal Guardian's* Signature

Date