

1	Postal Address																		
						Postal Code													
Tel. No																			

DECLARATION	
<ol style="list-style-type: none"> 1. I undertake 1.1 to comply with the rules and regulations of the University of Venda should my application be successful. 1.2 to inform the School Administrator immediately, if I change my address, and 1.3 acquaint myself, with all the rules and general regulations that relate to the programme for which I am applying. 2. I/We hereby absolve the University of Venda, its staff, employees, representative and/or agents from any claims which I/the student may acquire as a result of any injuries which I/the student may receive and/or damages which I/the student may suffer as a result of any happening, incident, accident, injury, illness or death however, it may have resulted or as a result of my/his /her participation in any tour/outing/excursion/visit or transport which may take place during my/his/her studies at the University. 3. I/We accept that I/the student shall participate in the activities mentioned in paragraph 2 on my/his/her own responsibility and shall voluntarily accept the risk incidental thereto. 4. I/We hereby accept liability for the payment of all study, class or other fees which may be charged by the University as a result of my/his/her studies at the University, if the application is successful. 5. I am aware that my enrolment is valid only if it complies with the regulations of the programme concerned, notwithstanding the acceptance of this application by the University. 	<p>I declare;</p> <p>that I conclude this agreement with the knowledge and Consent of my parents/ guardians/employer</p> <ol style="list-style-type: none"> 5.1 that all particulars given by me on this form are true and correct.

Signature of applicant

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Date

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Signature of Parent/
Guardian
*(If applicant is under
21years)*

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Date

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