



**INDEMNITY FORM**

Sea Turtle Research Unit (SEATRU)  
Institute of Oceanography and Environment (INOS)  
Universiti Malaysia Terengganu

**Participant Information**

Name: ..... Gender: .....  
Age: ..... I/C or Passport Number: ..... Nationality: .....  
E-mail: ..... Telephone Number: .....  
Address: .....  
.....  
Occupation: ..... Employer: .....  
If student, name of Institution & Program: .....  
Slot: ..... Start Date: ..... End Date: .....

**Next-of-kin Information**

Name: ..... Telephone Number: .....  
Address: .....  
.....

***NOTE: To participate in the Sea Turtle Research Unit (SEATRU) Program at Redang Island, sign and return the following exclusion of liability and indemnity agreement before the start of the program.***

I shall assume all liability(ies), including death, to myself which resulted from any accident(s)/occurrence(s) during my attachment to the Sea Turtle Research Unit (SEATRU) Program at Redang Island. I hereby agree to exempt Universiti Malaysia Terengganu, its officers, or employees or any sponsoring organization, its owners or employees (Organizer), and release and discharge them from all liability(ies) and all damage(s), and any claim(s) or demand(s) thereof on account of injury, including death, to myself which results from the accident(s) or occurrence(s) during my attachment to the project, whether caused by negligence of the Organizer or otherwise. I further agree to protect, indemnify, save and hold harmless Universiti Malaysia Terengganu, other sponsors, and their officers, and employees from all damage(s), claim(s), suit(s), expenses, and payment(s) on account of or resulting from any such injury, including death, to myself which results from any accident(s) or occurrence(s) or otherwise for the duration of this project.

I, the undersigned, understand and accept the risks and responsibilities associated with being a volunteer in the Universiti Malaysia Terengganu Marine Turtle Conservation Project. I have read and voluntarily signed this Waiver of Liability and Indemnity Agreement, and further agree that the Organizer has made no other oral representation, statement or inducement other than this written agreement to me.

Signature: ..... Date: .....  
Name (as per NRIC/Passport): .....