



ETC International College

ETC Activities Waiver Form

December 2025

I,, confirm that I have taken control of students in the
group, containing(number) students for(name and type
of activity) on(date of activity – day / month / year).

I have specifically requested that ETC International College should not assist me with this activity.

By taking over responsibility for these students on this activity, I understand that I have absolved
ETC International College and its individual staff members of responsibility for these students for
the duration of the activity as indicated above.

Signature:.....

Full name:.....

Organisation:.....

Date:

Time:.....

Countersignature by ETC staff member:

.....

Full name:.....

Job title at ETC:

Date:

Time:.....