



Oord Goudrand GGN (3577)
25-26 Mei 2018

Beste Graad 4 - Ruimtewaarneming

Inpaklys

- Baie energie!
- **NB: Nota met nood kontak nommers en Mediese fonds besonderhede (Sien onder aan dokument)**
- **NB: "The National Research Foundation" Vrywaringsvorm. As jy hom nie bring nie gaan jy nie op die uitstap nie. (Sien onder aan die dokument)**
- Bordesak – Volledig (papierborde binne gewone bord vir etes asseblief)
- Slaapsak, kometers, kussing en kamp matrassie
- Sweetpak om in te slaap (nie slaapklere nie)
- Warm klere vir die aand.
- WARM BAADJIE (dit is vrek koud by die sterrewag se uitkyk punt)
- Toiletbenodighede en handdoek
- Spandrag is reg vir Vrydagaand
- Aktiewe drag vir Saterdag.
- Leë 2 Liter koeldrank bottel. (Coke)
- **GEEN rooi of groen laserswysers of teleskope nie. Ons kan nie verantwoordelikheid neem vir duur toerusting nie en dit sal nie gebruik word nie**
- **Geen Selfone!**
- Offisiere, maak asb. seker dat jou span die storie van *Goue Lökkies en die drie bere* ken
- **Snoepie geld**



OORD GOUDRAND

DieVoortrekkers.Goudrand@gmail.com
082 494 8847

Chaleen Strydom (Oordleier, Anna Herbst (AOL Admin, Gawie Naude, Hendri van der Loo





Die Voortrekkers

Ruimtewaarneming, Handvaardigheid, Sterrekunde, Godsdiens en Seremonies

Vul asseblief die vorm in en stuur saam op die kentekendag.

Naam: _____

Kontak nommer: _____

Mediesefonds naam en nommer: _____

Kommando: _____

Allergieë: _____



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The National Research Foundation

Indemnity Form

Surname: (as in your identity document /passport)

First name(s): Title (Mr/Mrs/Ms/Dr/Prof).....

Residential Address during term:

.....

Telephone: Cellular:

Identity Number: Date of Birth:

Citizenship:

Issuing Country and Passport No:

Person to contact in case of emergency: Name.....

Relationship: Contact Number:

Any other information the fieldwork co-ordinator /project or programme manager should know? :

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I, the undersigned hereby indemnify the National Research Foundation and its employees against and renounce and waive any claims or actions that I or any other person may have, whether direct or consequential, arising from

1. any incident while I/we for whatever purpose am on the premises or in any building that is occupied / controlled by the NRF;

2. collision while being transported for whatsoever reason by the NRF or any of its officials or employees;

3. whatsoever cause regardless of whether such is caused by any negligence or omission on the part of NRF.

4. No publications/research/pictures will be published without prior consent of the NRF.

Thus done and signed at on this the..... day of..... 20....

..... UNDERSIGNED

WITNESS

NB: Please return this Indemnity Form to the fieldwork co -ordinator /project or programme manager