

NOTICE UNDER THE REGULATION OF GATHERINGS ACT

The Responsible Officer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am aware of the provisions of the Regulation of Gatherings Act, 1993 (Act No. 205 of 1993) and wish to notify you in terms of section 3 of the Act of an intended gathering. The particulars are as follows:

1. CONVENER

	Name	Address	Telephone number	Facsimile number	Other numbers
Convener					
Deputy Convener					

2. ORGANIZATION

The convener is acting on behalf of the (state the full name of the organization)

\_\_\_\_\_  
\_\_\_\_\_

3. THE GATHERING

3.1 The purpose of the gathering is to

\_\_\_\_\_

3.6.5 The participants will be transported to the place of assembly by (state mode of transport) \_\_\_\_\_ and from the point of dispersal by \_\_\_\_\_

3.6.6 The number and types of vehicles to form part of the procession are \_\_\_\_\_

3.6.7 If procession should pass within a radius of 100 meter from a court building, attach the written permission from the magistrate.

4. TIME OF NOTICE

If notice is give later than seven days before the gathering, state reasons why notice was not given timeously


5. PETITIONS

We wish to hand over a petition to (name or designation of person to receive the memorandum)

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at (place where petition must be handed over)

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The above person was notified on \_\_\_\_\_ (date) at \_\_\_\_\_ (place) of the above arrangement.

6. OTHER FACTS PERTAINING TO THE GATHERING

State what arrangements have been made for:

- 6.1. Parking for vehicles and buses
- 6.2. Toilet facilities / water points
- 6.3. Resting places along the route


Signed on \_\_\_\_\_ at \_\_\_\_\_

\_\_\_\_\_  
CONVENER

**INDEMNITY**

Given and entered into by: \_\_\_\_\_  
\_\_\_\_\_

(Hereinafter referred to as the \_\_\_\_\_)  
in favour of -

**KWADUKUZA MUNICIPALITY** (Hereinafter referred to as the Council)

Whereas the \_\_\_\_\_ may be given permission to \_\_\_\_\_

Within the Area of Jurisdiction of the Council, subject to the Council being indemnified to the satisfaction of the City Treasurer.

**NOW THEREFORE THESE PRESENT WITNESS**

The \_\_\_\_\_ does hereby indemnify the Council and hold it harmless against:

1. Any damage to the Council's property, whether, movable or immovable, including any consequential damage or loss directly flowing from physical damage to such property or any act or omission on the part of the \_\_\_\_\_;
2. Liability in respect of any claims which may be made against the Council arising out of damage to the property, whether movable or immovable, of any third parties, including any consequential damage directly or indirectly flowing from physical damage to such property;
3. Liability in respect of the death or injury to any person, including a servant of the Council, any consequential damage or loss flowing therefrom;
4. Any legal costs or expenses reasonably incurred in connection with claims or actions arising out of the foregoing;

Whenever the damage, loss, injury or death contemplated in (1), (2), or (3) above is due to or arises out of, whether directly or indirectly \_\_\_\_\_

by or on behalf of the \_\_\_\_\_, provided that the indemnity conferred upon the Council hereunder shall not extend to damage, loss, injury or death which is predominantly due to the misconduct or negligence of the Council or of any servant of the Council acting within the course and scope of his or her employment.

As security additional to this indemnity and for the due and proper fulfilment hereof, the \_\_\_\_\_ shall take out a policy of insurance, in the joint names of the \_\_\_\_\_ and the Council, the terms and conditions of which policy shall be to the satisfaction of the City Treasurer, with an insurance company approved by the City Treasurer, for a minimum amount of R \_\_\_\_\_ any one occurrence and unlimited as the number of occurrences during the period of insurance.

**AS WITNESSES**

SIGNED: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ID. NO.: \_\_\_\_\_  
CAPACITY: \_\_\_\_\_  
DATE: \_\_\_\_\_

1. SIGNED: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ID. NO.: \_\_\_\_\_  
  
2. SIGNED: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ID. NO.: \_\_\_\_\_

REVENUE  
STAMP