

PO Box 15076 Bradenton, Florida 34209 941-447-0773

## **RELEASE OF LIABILITY WAIVER**

In consideration of being allowed to participate in any way in activities with, for or on behalf of Friends of the Pelicans, Inc. (the "RELEASEE"), the undersigned acknowledges, appreciates and agrees that the risk of injury and illness from the activities may be significant, including the potential for permanent injury and death, and while particular equipment may reduce this risk, the risk of serious injury or illness does exist; and I, KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE or others and assume full responsibility for my participation.

I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest supervisor immediately; and I, for myself and on my behalf of my heirs and assigns, personal representative and next of kin, HEREBY RELEASE AND HOLD HARMLESS the FRIENDS OF THE PELICANS, INC., their officers and directors, agents and/or employees, other participants, other volunteers, and if applicable, owners and lessors of premises used to conduct the activities WITH RESPET TO ANY AND ALL INJURY, SICKNESS, DISABILITY, DEATH, or loss or damage, to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me and my participation in, and attendance, at Friends of the Pelicans, Inc.'s activities and hereby freely agree to allow without restriction all uses of such photographs and videos in the recording of the activities and/or promotion in the activities, their locations and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY.

	Address:	
Participant's Signature		
Printed Name:	Phone:	
Date:	Email:	

FOR: MINOR PARTICIPATION (Under Age 18):

This is to certify that I, as parent/legal guardian with legal responsibility for this participant, to consent and agree to his/her release as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement

or participation in these programs as provided above, EVEN IF A the fullest extent permitted by law.	ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to
Parent/Legal Guardian Name:	
Signature:	Date:
Address:	
Emergency Contact Phone:	
Email:	