

Address:

Participant's Signature:_____
Department/Organization:___

City:____ Phone:___

Event Participation Release

Florida Department of Environmental Protection Office of Greenways & Trails 3900 Commonwealth Blvd., MS 795 Tallahassee, Florida 32399-3000



	Tallahassee, Florida 32399-3000	FIOUNDADI CELIMATSANO IL QUSCUM
IN CONSIDERATION of being g		Activity") on
	(Date), I, for myself, my participating minor c	hildren, and our personal
representatives, assigns, heirs, and	next of kin:	
 ACKNOWLEDGE, agree and and that I am qualified, in good he 	represent that I understand the nature of the Activity, ealth, and in proper physical condition to participate is	both on water and land based, n such Activity.
injury, including permanent disab my own actions or inactions, the a Activity takes place, or the neglig economic losses either not known	(a.) THE ACTIVITY INVOLVES RISKS AND DATA ility, paralysis and death ("Risks"); (b.) these Risks and actions or inactions of others participating in the Active ence of the Releasees named below; (c.) there may be to me or not readily foreseeable at this time; and I FUND ALL RESPONSIBILITY FOR LOSSES, COSTS activity.	nd dangers may be caused by vity, the condition in which the e other risks and social and ULLY ACCEPT AND
if I observe any condition which I	at I will examine and inspect each part of the Activity consider to be unacceptably hazardous or dangerous, and will refuse to take part in the Activity until the constant of the Activity unt	, I will notify the proper
IMPROVEMENT TRUST FUND ENVIRONMENTAL PROTECT AND TRAILS FOUNDATION, In participating organizers of the Act which the Activity takes place, (e or damages on my account caused otherwise, including negligent res assumption of risk, and indemnity against any of the Releasees, I W	ge, and covenant not to sue the BOARD OF TRUSTED OF THE STATE OF FLORIDA, the STATE OF FLON, OFFICE OF GREENWAYS AND TRAILS, or NC., their officers, employees, agents, contractors, and tivity, any sponsors, advertisers, and if applicable, ow ach considered one of the Releasees herein) from all I do ralleged to be caused in whole or in part by the nest cue operations; and I further agree that if, despite this agreement, I, my minor children or anyone on my or ILL INDEMNIFY, SAVE AND HOLD HARMLESS IS, loss, liability, damage, or cost which any may incur	the FLORIDA GREENWAYS and volunteers, other where and lessors of premises, on liability, claims, demands, losses gligence of the Releasees or a release and waiver of liability, in their behalf, makes a claim as each of the Releasees from any
have signed it freely and without unconditional release of all liabil	erstand its terms, understand that I have given up sub- any inducement or assurance of any nature and intend- ity to the greatest extent allowed by law and agree that atwithstanding, shall continue in full force and effect.	d it to be a complete and
Printed Name of Participant:_	and the second of the last constitution of the second of t	ya esbest at (hetyg ikî jaka kerilit <u>aj pa</u> na esbestat kuri jihayaya jina salama
	inor Children:	i notatibem to savida a es bectimos ed los la mases to gratino gondovini tiert bas escrevist
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State:__

Zip:_