

EVENT PERMIT



Ordinance 14-15

SURFERS FOR AUTISM

PERMIT NUMBER:

TMP2017-00304

Date(s) of Event:

October 28, 2017 from 9am-4pm

Property Owner:

LEE COUNTY

Applicant:

SURFERS FOR AUTISM

Contact: DON C RYAN

Description:

The 6th Annual Gulf Coast Beach Festival Surfers for Autism including surfing, paddle boarding, music, beach games, interactive exhibits, giveaways, prizes and

raffles.

Location of event:

1100 ESTERO BLVD FORT MYERS BEACH 33931 CRESCENT BEACH FAMILY PARK/***561-445-7154

Will the event be attended by 1000 or more people?

Yes

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

No

Will a bond be posted for this event?

No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners

Lee County, Florida

County Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

1MP2017-00304



Event Application

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

	COMMATION (All Dormit Types)
	ORMATION (All Permit Types)
itle of Event / Name of Production	THE 6TH ANNUAL GULF COAST BEDEN FRESTIVAL SURFERS FOR AUTISM
Date(s) of Event / Production:	10-28-12
ocation(s) of Event:	CASSERAT BCH. PARK, FMB -1100 ESTERO BI
Name of Applicant:	DON C Ryan
Applicant Address:	7899 SANTA FE TROK BOLA RATON FL 33487
Applicant Phone Number:	561-445-7154
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	SURFERFORATION BLIVE. COM
Estimated Attendance:	1500-2000
Event Description: Include each activity, when activities take place, etc.	PLEASE SEE ATTACHED KEY NOTES
Hours of Operation:	9 su - 42m
STRAP # of Parcel:	244623W300013D00D
Owner of Premises*:	LEE COUNTY

Page | 1



ill out the following questions for allpermit types:	Secretary of Automotive
What is the Zoning Classification of the premises?	Park
Are any temporary structures to be installed for the event? The No	Туре:
Do you have the appropriate permits for the temporary structures?	TYes INO NA
For a 'Special Event' and 'Use of County Property' permit, submit a site plan indentified, including all parking areas.	with all proposed facilities and activities
Insurance Company Insuring the Event: Bounder - CE	127 ATTACHED
Note: Certificate of Insurance must be submitted at time of application	
Surety Company Bonding this Event (Name and Address):	
Will Vehicles be Used as Part of This Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
Yes No Yes No	Yes
If yes, automobile coverage must be included on the certificate of insurance. If yes, products liability coverage must be included on the certificate of insurance.	if yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food: Legal Resmittant	REPARING OFF SITE AN
Type of Food being Served: DELIVERING - DONA	1-90 - FRES FOR PARTICUM
Section II - USE OF COUNTY PROPERTY PERMIT	
Organization Sponsoring the Event:	
Fill out this portion for applications for Solicitation in the County Rights-of-	Nay:
Name of Charity: SURFERS FOR AVEISM,	INC
Address of Charity: 7491 N. FEDERAL HW/ Boc	A RATIN FL 33-187
Phone Number: 561-445-7154	
Non-profit certificate/registration number:	
[Proof of registration with the Dept. of Agriculture & Consumer Services §496.405 or proof the organization	ntion is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGE	S PERMIT
Is alcohol being sold/consumed on County Property? If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County.	Yes No County Property.
Non-profit certificate/registration number: (Required if alcohol is to be <u>SOLD</u> at the event)	
Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco further details	may also be required; please call (239) 344-0885 for
The property of the property o	the state of the s

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Signature of Applicant

Witness

Witness

Print Name of Applicant and Title

Witness

Yall 7



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the appropriate box(es) below:

	ENT PERMIT	
▼ USE OF COL	JNTY PROPERTY F	PERMIT
PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLICANT TO COMPL	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
	Parking in authori	ized areas only.
Parking:	T diffing it backing	
Deputies (How Many?):	None required	
Fee for Services:	None	
Special Arrangements:	Event must follow	v noise control ordinance 15-01 which is attached
opecia, rui etto etto etto		
	Print Name:	Castain I Loothon
		Captain J. Loethen
	Signature:	(apt 1 Forth 92149
	Title:	Special Events, Permits and Details
	Date:	8-29-17
	Sport Such Se South S.	0-,5-1



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appro	priate	box(es)	below:
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SPECIAL EVENT PERMIT

□ USE OF COUNTY PROPERTY PERMIT

FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)	None			· 4.	
Fee for Services:	Fees waived for ven	ndor space for communit	y education and outrea	ch	
Flammable Vegetation:					
First Aid Equipment:	Fire Prevention and	Community Outreach Te	ent, first ald tent provid	ed by vendor	
Fire Extinguishing:	NONE				
Special Arrangements:	NONE				
	Print Name:	Ronald L. Martin			
	Signature:	Rosald L. Wartin C. Asst.	Chief		
. **	Title:	Executive Assistant Chic	ef		
	Date:	10-10-2017			
	7	Powe 17		-	



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appropri	ate box(es) beloi	W:	•	
SPECIAL EV	ENT PERMIT			
∇ USE OF CO	UNTY PROPERTY P	ERMIT		
FILM PERM	IIT			$(x_1, x_2, \dots, x_n) \in \mathcal{Y}$
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	EASE INDICATE BELOW WITH FOR THEIR EVEN	WHAT ARRANGEMENTS	YOUR ORGANIZATION
Treatment Facilities:	See special arrangen	nents below.		
Medical Personnel:	See special arrangen	nents below.		
Medical Supplies / Equipment:	See special arrangen	nents below.		
Safety Requirements:	See special arrangen	nents below.		
Fee for Services	See special arrangem	nents below.	·	
Special Arrangements:	As this event is in the the event.	e jurisdiction of Fort Myers	Beach Fire, they have agreed to	provide EMS coverage for
	Print Name:	Benjamin Abes		_
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2017,10,10 16:03:26 -04'00'	
	Title:	Chief		 -
	Date:	10/10/2017		-



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

			·	
Check the appropri	ate box(es) belo	ow:		
SPECIAL EV	ENT PERMIT		•	
▼ USE OF CO	UNTY PROPERTY I	PERMIT		· · · · · · · ·
PERMIT TO	SELL AND CONSU	IME ALCOHOLIC BEVERA	AGES WITHIN LEE COUNTY	FACILITIES
FILM PERM	IIT		-	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PL	LEASE INDICATE BELOW LY WITH FOR THEIR EVE	WHAT ARRANGEMENTS	YOUR ORGANIZATION
Parking:	No event parking or	n Lee County maintained roa	ad rights-of-way.	
Ingress and Egress:	Use all established	means of ingress and egress	•	
		No. of the control of	makes summakes and the second	
Special Arrangements:	Vaus Malnar of Call	a-Molnar (239-337-1071) at ork in this area to confirm/re	ith traffic control. The event ap least two weeks prior to the event appropriate the event appropriate and a second second and a second a second and a second a second and a second a second and a second a second and a second and a second and a second and a second an	ent to commin the status of
* .	Print Name:	Bryan Miller		<u>-</u>
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2016.09.13 08:40:53 -04'00'	-
.	Title:	Senior Project Manager		···
	Date:	September 13, 2016		.
	Date.	September 13/2010		- · .



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropri	ate box(es) belc	pw:	
SPECIAL EV	ENT PERMIT		
	UNTY PROPERTY F	PERMIT	
		ME ALCOHOLIC BEVERAGES WITH	IIN LEE COUNTY FACILITIES
FILM PERM			·
,			
		EASE INDICATE BELOW WHAT AF LY WITH FOR THEIR EVENT.	RRANGEMENTS YOUR ORGANIZATION
Illumination:	No illumination before Park is open from 7 a	ore 7 am. Lighting will not be required o	r permitted.
	Park is open from 7 a	an to dusk.	
Parking Areas:	All parking is off site	. Use of on-site parking is for equipmen	t trailer & emergency vehicles only.
Special Arrangements:		le for any damages. A thorough walk-th ty representative & event coordinator.	rough of the park site must be made prior to
		;	
			•
· ·		·	
	Print Name:	Alise Flanjack	· ·
	Signature:	Also Flegade	
	Title:	Deputy Director	ng da Mikati kananan mananan mananan Majakanan
	Date:	Aux 24, 2017	en e
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Surfers for A	whim		
Crescut Beach @	PM13	Page 10	
oct. 28, 201	7		



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	e box(es) below:
	NT PERMIT
	NTY PROPERTY PERMIT
PERMIT TO S	ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	
AFTER REVIEWING THE A	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
nsurance Requirements:	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.
Special Arrangements:	A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.
	Subject to proof of insurance.
•	Print Name: Mike Figueroa
	Signature:
	Title: Risk Program Manager
	Date: August 24, 2017



CERTIFICATE OF LIABILITY INSURANCE

SURFE-2

OP ID: DC

DATE (MM/DD/YYYY) 12/27/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTAC NAME: PHONE (A/C, No, Ext): E-MAIL RPS Bollinger Sports & Leisure PO Box 390 Short Hills, NJ 07078-5000 ADDRESS MAIC # INSURER(S) AFFORDING COVERAGE AJ Morgan 38970 INSURER A: *Warkel Insurance Company INSURER B Surfers for Autism, Inc. INSURED INSURER C Kim Ryan 7899 Santa Fe Trail INSURER D Boca Raton, FL 33487 INSURER E INSURER F REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. COVERAGES POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) ADDL SUBR POLICY NUMBER TYPE OF INSURANCE 1,000,000 INSD WVD EACH OCCURRENCE
DAMAGE TO RENTED
PREMISES (Ea occurrence) X COMMERCIAL GENERAL LIABILITY 100,000 Д 01/01/2017 01/01/2018 3602AH021772 CLAIMS-MADE X OCCUR X 5,000 MED EXP (Any one person) X Incl Participants 1,000,000 PERSONAL & ADV INJURY 3,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: 1,000,000 PRODUCTS - COMPIOP AGG PRO-JECT POLICY MBINED SINGLE LIMIT 1,000,000 OTHER (Ea accident) AUTOMOBILE LIABILITY s BODILY INJURY (Per person) 01/01/2017 01/01/2018 3602AH021772 BODILY INJURY (Per accident) | S Α ANY AUTO ALL OWNED AUTOS SCHEDULED PROPERTY DAMAGE (Per accident) AUTOS NON-OWNED AUTOS \$ X X HIRED AUTOS S EACH OCCURRENCE \$ UMBRELLA LIAB OCCUR AGGREGATE 3 EXCESS LIAB CLAIMS-MADE RETENTIONS PER DED WORKERS COMPENSATION AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETORIPARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) MIA E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT | \$ if yes, describe under DESCRIPTION OF OPERATIONS below 25,000 01/01/2017 | 01/01/2018 | Med Max: 4102AH021771 Accident Insurance \$250/Claim Ded: Full Excess DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The certificate holder is listed as an additional insured on the liability policy. Coverage is provided under this policy only for sponsored/supervised activities of the named insured for which a premium has been paid. ound woln CANCELLATION CERTIFICATE HOLDER LEECOU3 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County Board of **County Commissioners** AUTHORIZED REPRESENTATIVE 2115 2nd Street Ft. Myers, FL 33901

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ACORD 25 (2014/01)

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Family Park

Surf / Recreation Zone -

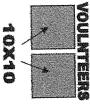
Dunes / Beach Access

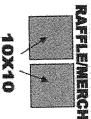
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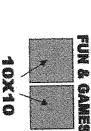


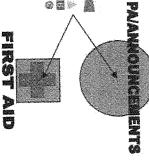


















- = SURFERS FOR AUTISM TENTS
- = SPONSOR / RESOURCE TENTS
- = MEDICAL PROVIDED BY SURFERS FOR AUTISM



REFERR TO KEY NOTES FOR ALL OPPERATIONS INFORMATION Dunes / Beach Access

EVENT SITE TENT LAYOUT



KEY NOTES ABOUT SURFERS FOR AUTISM EVENTS

(This document must remain with all applications during the approval circulation process)

ACTIVITIES

The day's activities will include surfing, paddle boarding, music, beach games, interactive exhibits, giveaways, fun contests for prizes and raffles. Depending on location the day also may include Fire Engine tours, Paint the Fire Engine, static displays and interactive exhibits provided by local Police, Sheriff, Military, USCG and/or FWC.

PERMITTING/COMPLIANCE

This organization prides itself on being 'over the top' considerate and compliant to all host municipality and Florida Dept. of Environmental Protection laws, regulations, rules and ordinances. We respectfully request that each of our permitting departments in the host community, from the beginning of the permitting process, provide us with a complete list of requirements along with any issues or concerns the residents, that may be directly impacted by an event of this type, will have or have had in the past. We will complete all applications, submit all required documents, follow protocol to the letter and provide all information with regards to our program and operations. We are not only seeking permission from the governing body, we also seek to be welcomed by the community.

TEMPORARY STRUCTURES/TENTS/CANOPIES

The use of temporary structures are an absolute necessity in order to protect the hundreds of event volunteers and staff from the sun's harmful rays. SFA owns and maintains its own set of 10x10 aluminum pop-up tents manufactured by EZ-Up International, a world leader in quality and safety. Our team of professionals erect these shelters in accordance with the site plan submitted with the event permit application. A fire certification is also included. There may be slight variances due to beach erosion and tide changes. The employment of a professional company to erect commercial or oversized tents is not necessary. Each shelter is secured to the ground with four 75lb sand ballasts attached by nylon straps with a 2000lb load rating. All sponsors and exhibitors wishing to erect shelters are required to use a professionally made product and sand or water ballasts to secure them. STAKING INTO THE SAND TO SECURE TEMPORARY STRUCTURES OR ANYTHING IS STRICTLY PROHIBITED BY SFA.

Surfers For Autism, Inc. 7491 N Federal Hwy, C5-180 Boca Raton, FL 33487 www.surfersforautism.org



EVENT HOURS SET-UP/BREAK DOWN

Official event hours are from 9am to 4pm. This is when festival activities for registered participants will begin and conclude. Set up will begin as close to 6am as possible, immediately following clearance from local turtle patrol. Break down will commence just prior to 4pm and will conclude at 6pm followed by an organized beach cleanup. A beach cleanup will also be conducted following lunch.

FOOD SERVICE/CATERING

A catered lunch is provided, free of charge, to all registered participants, any family member that is attending with them and all registered volunteers at all SFA events. The food is prepared off site and donated by local restaurants that choose to support our initiative. Our Executive Director of Hospitality will organize volunteers to pick up and serve catering. Safe food handling practices are maintained at service.

VENDORS/EXHIBITORS

Vending or selling of wares is strictly prohibited at all SFA events. No Exceptions. Our supporters and sponsors are welcome and encouraged to showcase their business through displays, networking and distributing approved literature. The detection of any exhibitor exchanging monies at their booth will result in immediate expulsion. All exhibitors are requested to provide a fun activity for kids at their booth.

ADMISSION/FEES/FUNDRAISING

THIS IS NOT A FUNDRAISER. THIS IS A FUN RAISER

Surfers For Autism events are free of charge to all registered participants, open to the public and are not fundraisers. The presence of a fundraising element does exist at each event but is unpublished and in the background. There is the opportunity for those who wish to support our organization monetarily through donations for our raffle or branded apparel. Our goal here is to remain self supportive/funded without making anyone feel obligated or pressured to make a donation.

AMPLIFIED SOUND/NOISE ORDINANCES

It is necessary for SFA to use amplified sound through a PA system at all events to conduct meetings, make announcements, locate lost individuals and play recorded music. Our PA will go live at 8am to conduct a mandatory volunteer meeting and will be shut down at aprox. 4pm with event conclusion. Although considerate to all ordinances with regards to noise and amplified sound the size of these venues make it nearly impossible to voice project in any other form, therefore making this element crucial in conducting safe and organized events.

Surfers For Autism, Inc. 7491 N Federal Hwy, C5-180 Boca Raton, FL 33487 www.surfersforautism.org



ALCOHOL/ILLEGAL DRUGS/CONTROLLED SUBSTANCE

The consumption of alcohol is strictly prohibited before the conclusion of all event activities at 4pm. Surfers For Autism, Inc. reserves the right to restrict the possession or consumption of alcohol, regardless of local laws and ordinances, within the organizations permitted and insured event boundaries. Any observed illegal drug activity will be reported to local law agencies.

MEDICAL/FIRST AID/FIRST RESPONSE

Surfers For Autism travels with our own team of first responders comprised of Doctors, (most events) Paramedics, (all events) Life Guards (all events) and Registered Nurse (all events) - all volunteered. We also provide a clearly marked medical pavilion on the beach at all events that is fully stocked to respond to most medical emergencies. We are capable of and have the ability to respond to trauma victims with the administration of 02, fluids intravenously and cardiac arrest with AEDs. It is organization policy that we let local Ocean Rescue and/or Fire Rescue take command during any medical emergency, other than minor, but we are prepared to respond swiftly and decisively.

ATTENDANCE

Surfers For Autism produces grand scale, world class events that garner crowds in the 2,500 to 10,000+ range. Before we reach the event site we are certain that there will be 1000+ through our crew, registered participants, family members/care givers accompanying them and registered volunteers. SFA will collaborate with local officials regarding crowd control plans. All SFA staffers are Fire Marshal certified crowd control managers.

VOLUNTEER REGISTRATION

Surfers For Autism is completely committed to providing a safe environment for its participants and families. The minimum registered volunteer requirement is 200 and the maximum limit is 350. The minimum age for volunteering is ten years old with no maximum age limit. ALL volunteer, weather pre registered or walk-ups, are checked through law enforcement database. Anyone who is a registered sex offender attempting to volunteer will be rejected, black listed and reported to local authorities for the attempt. Our organization takes this commitment very seriously and will do anything, within legal limits, to protect its participants.

Surfers For Autism, Inc. 7491 N Federal Hwy, C5-180 Boca Raton, FL 33487 www.surfersforautism.org



PARTICIPANT REGISTRATION

A participant is classified as a pre registered individual considered to possess developmental, intellectual, emotional delays, and/or some physical disabilities. These individuals will be the only attendees to participate in the aquatic activities of the program. The limit for registered participants is 200. This limit exists not as a result of the inability of our organization to safely take more than 200 into the ocean but to maximize the number of sessions. The parents, guardians and/or caregivers are sometimes desperately seeking breakthroughs and our goal is to provide as many opportunities as possible at each event. In a case where we do not electronically register the limit we will accept walk ups on event day. Our program guidelines and equipment do not permit the registration of plegics (people bound full time to a wheelchair due to paralysis or other physical disabilities).

PHOTOGRAPHERS/VIDEOGRAPHERS/MEDIA

All photogs and media persons, regardless of affiliation, are required to check in at registration to provide credentials and receive a wrist band. It is policy that a talent release waiver be signed releasing all images and recorded video and audio as property of Surfers For Autism, Inc. Anyone capturing images or video without following this policy will be asked, lawfully, to leave the permitted and insured event area. Upon detection of any suspicious activity we ask that local law authorities recognize the legitimacy of this policy and assist.

-SURFERS FOR AUTISM-

UNLOCKING POTENTIAL - CREATING AWARENESS ELIMINATING STIGMA - UNITING COMMUNITIES