First Name: Address: Birth Date (M/D/Y):	Las Parent/Gu	dual Membership Applica et Name: City: uardian (if under 18)(please	Nickname:	
Birth Date (M/D/Y):	Parent/Gu		State:	
Birth Date (M/D/Y):	Parent/Gu			Zip:
Email address:				
		Home Phone #:		
Work Phone #:		Cell #:		
Emergency Contacts (other				
Name:		Relationship:	Phone #:	
		Relationship:		
the risk and legal liability a child/ward might sustain a County Park programs/acti acknowledge that there ma agree to assume the full ris said participation. I further me or my child/ward as a reofficials, officers, employe and forever discharge the Famay have or which may a associated with these program I indemnify and ho my use of county property County, its employees and/child's/children's use of counder general law. I hereby grant permander Lee County promotion. I unincluding but not limited to general public. This is to certify the to his/her release as provide participation in the program I have read, had rear read to me and fully understand the sustained to the sustained to the sustained to me and fully understand to me and fully	and waiving and residual sets a result of participates (including by be certain risk k of any injuries, agree to waive a result of participates, and volunteer parties from any accrue to me or mans/activities. Id harmless Lee or participation is for agents from all unty property and the activities at I, as parent/guided above and, for as provided above and, for as provided above in stering via fax, mere.	Parks and Recreation prograteleasing all claims for injuricipating in any and all activitransportation services/vehicles involved in participating damages or loss, that my mand relinquish all claims I or ing in such program/activity is (hereinafter collectively reand all claims for injuries, damy minor child/ward and a County, any of its employed in any county programs. I will costs, expenses and liabilited/or participation in county programs or other types of announcements, department ardian with legal responsible or myself, my heirs, assigns ove. had this translated into	ies, damages or loss whice vities connected with and cle operation, when providin park programs/activities inor child/ward or I may be against the County, incluse ferred as "Parties"). I do amages, or loss that my maising out of, connected were and/or agents from any cill further indemnify and a programs to the extent of the tographed or recorded in of media production may be a throchures, and other providing for this participant, does, and my minor child/ward and read or had the ing of risk, assumption of the substitute for and have a substitute for a substi	h you or your minor associated with Lee ded). I recognize and es, and I voluntarily sustain as a result of ay have or accrue to ding their respective hereby fully release ninor child/ward or I with, or in any way and all claims from "hold harmless" the im brought from my he County's liability connection with any be used for purposes, ograms shown to the do consent and agree ard's involvement or the translated version risk and waiver and

Witness Printed Name

Date

Witness Signature