

Friends of Spoil Islands (FOSI) Boat Trip

April 7, 2018

[SIGN UP HERE](#)

Name: _____

Address: *(Optional)* _____

Email: _____

Phone: _____

We do not share this information with anyone else.

Must be submitted before March 25th 2018

FRIENDS OF THE SPOIL ISLANDS INC.

Sign-Up, Release of Liability and Photo Consent Form.

EVENT: "**St. Lucie Audubon Boat Trip**"

DATE: April 7, 2018

By my signature below, I acknowledge I am over the age of 18 and acknowledge and agree to the following:

(1). I certify that I have no medical conditions or restrictions that would prohibit me from participating in this Event, nor does FRIENDS OF THE SPOIL ISLANDS, INC. (FOSI) assume any responsibility for evaluating my medical condition or determining my fitness to participate in the activities associated with this Event.

(2). At all times, I am acting as an unpaid, independent participant, and as such, am not entitled to any provisions of law regarding FOSI employment; nor any laws to hours worked, rates of compensation, leave time or employee benefits.

(3). I recognize and understand that I am at all times responsible for my own safety and the safety of others, and that in participating in this Event, I may encounter natural or other hazards. I assume the risk of any such hazards and recognize that I am responsible for staying alert as to potential hazards and taking appropriate steps, including discontinuing any activities that involves a risk of bodily harm.

(4). I hereby hold and save FOSI, its directors, officers, employees, and representatives, harmless from and agree to indemnify same against, any and all claims and losses that may be made by me or my heirs, spouse, or other persons, for personal injury, loss of life, or property damage that may result from my participation in this Event. This waiver and indemnity obligation includes claims based upon my partial or sole negligence or that of FOSI.

(5). I hereby give permission to Friends of the Spoil Islands Inc. and their representatives to take photographs or videos of me, or my minor child(ren) in connection with this event. They may copyright, use and publish such material in print or electronically and use these images with or without my or my minor child(ren's) name for any lawful purpose including: publicity, illustration, advertising and Web design. Check this box only if you **do not** wish to give permission for photographs and videos etc. to be taken .

Signature of Participant: _____

Address: _____