2015 SEMINOLE COUNTY LEISURE SERVICES DEPARTMENT
HOLD HARMLESS/INDEMNIFICATION/PHOTO RELEASE AGREEMENT

I, _____, wish to participate in Seminole County Parks/Leisure

Date of Birth if under age 18_____

Services activities as a participant_____ or Volunteer_____. Please check one.

And do hereby consent, authorize and grant permission to Seminole County, its agents, employee and duly authorized agents, including SGTV, to copyright, publish and otherwise use images of me and/or recordings of my voice in all print or electronic media and further consent to the publication, circulation dissemination and broadcast of said images and/or recordings for any purpose the County may deem proper.

I hereby declare and certify that I am over the age of eighteen (18), (or if under eighteen, with parental consent as indicated below), and have no health problems that would endanger me in the performance of the activities I have chosen.

In consideration of Seminole County's permission for my participation in this program I hereby release and discharge Seminole County, its agent, officers and employees from any and all claims, demands, grievances, and causes of action of every kind whatsoever, including, but not by way of limitation, all liability for property damages and personal injury of every kind, nature or description arising or which may hereafter arise from my participation in the program or my presence on County sites or in County Vehicles as a part of said participation.

I hereby indemnify and hold harmless Seminole County, its agents, officers, and employees from any and all claims, demands, and causes of action of every kind and nature arising out of my participation in the Seminole County sponsored programs or out of my presence on County sites or in County vehicles as part of said participation. .

This agreement will expire on Dec 31st of each year and must be renewed to continue participation in Seminole County Parks/Leisure Services activities.

_____

Signature (Parent if participant is under 18 years) Date Phone

_____

Print Name Address E-mail

In case of emergency please notify _____ Relationship_____Phone_____

12.12