

Registration and Indemnity Agreement

For Sandy Beach Surfing Experience Programs

Program Name: _____ Date: _____

Student Name: _____ Age: _____ Male: _____ Female: _____

E-Mail: _____@_____ Phone: (_____) _____ - _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact:

Name: _____ Phone: (_____) _____ - _____

All students, and guardians of participating students, prior to enrollment and participation in the Sandy Beach Surfing Experience*, (referred to herein and after in this document as SBS) MUST first read and then complete the following Indemnity and Acknowledgement Agreement.

I, _____ (Student Name) agree to assume all risks incidental to participation in surfing, water sports, and related activities associated with the SBS. I hereby grant permission for myself or my child to attend the SBS. I hereby release SBS from any and all liabilities, claims, actions, damages, costs, and/or expenses, arising from or in any way connected with my participation in all surf school related activities conducted by SBS. I hereby agree that SBS, employees, and affiliates, are not responsible or liable for any injuries or damage resulting from my participation in any SBS activities. I understand and acknowledge that surfing and other water sports and related activities are inherently dangerous activities. I acknowledge and assume any and all risk associated with the presence of any and all sea life that may be in the water or on the beach.

I assume the entire responsibility of the performance of the activities associated with this agreement. I further expressly agree to indemnify and hold harmless SBS, Sandy Beach Surfing, LLC.,, their directors, officers, employees, and affiliate companies for any and all claims for injury to persons or damage to property or any other damages or losses by anyone, all of the foregoing to include all expenses and charges including attorney's fees, which may arise out of, or in connection with, the activities associated with this agreement, or which are alleged to have arisen out of activity associated with this agreement.

I verify that I am in good health and am fully capable of participating in any and all strenuous activities associated with any SBS activities. I fully understand that each participant must be a competent swimmer and acknowledge that I am a competent swimmer.

Student's signature: _____ Date: _____

I, _____ (Guardian's Name) as the parent or legal guardian of _____ (Students name) give my permission for my child or Ward to participate in SBS activities. I do understand and acknowledge the above stated risks associated with my child or Ward's participation in surfing related activities with the SBS.

Parent or Legal Guardian: _____ Date: _____