



Nassau County Sheriff's Office

Sheriff Bill Leeper

NASSAU COUNTY SHERIFF'S OFFICE TEAM FOR GIRLS GENERAL RELEASE AND WAIVER OF LIABILITY

_____ (print name of Participant), a volunteer participant in the Nassau County Emergency Management TEAM for GIRLS program (hereafter "TEAM for GIRLS"), and (print name of Parent/Guardian of Participant), in consideration for the privilege of participation in the TEAM for GIRLS program benefiting children, the receipt and sufficiency of consideration is hereby accepted and acknowledged, do both hereby release, waive, satisfy, and forever discharge and settle any and all claims, demands, causes of action, suits, controversies, judgments or damages of any kind or nature whatsoever, in law or in equity, which exist or may arise against Bill Leeper as Sheriff of Nassau County, or his successors, heirs, assigns, employees, appointees or agents, or Nassau County, Florida and its assigns, employees, appointees or agents, relating to any and all participation, in whatever activity or form, as a participant in TEAM for GIRLS, including but not limited to, injury, illness or death, and/or damage to, or loss of, personal property.

The undersigned Participant and Parent/Guardian have full understanding and appreciation of all risks and dangers associated with the TEAM for GIRLS program, including but not limited to: exposure to the Nassau County Sheriff's Office, the Nassau County Sheriff's Office Public Training Complex and gun range, the Nassau County Jail and Detention Center, the Nassau County Communications Center, or exposure to law enforcement related calls for service or other law enforcement tasks; coming into contact with, or hearing or seeing information related to cases or law enforcement calls that could be disturbing or violent in nature, or may contain adult language or vulgarity, injury, or death; or a tour of the Jail that might expose the Participant to hearing or seeing inmates or jail or confinement conditions; all dangers associated with participation in training exercises, including but not limited to participation in a physically demanding scenario that may involve running, jogging, jumping, bending, crawling, falling, or any physical law enforcement training involving defensive tactics, force or contact (such as handcuffing or simulated striking of a participant) as well as the use of marking or simunitions type projectile weapons commonly used in law enforcement training; and the risk of utilization of the Nassau County Sheriff's Office Strengthening Room or ancillary amenities or facilities (for example the locker room or shower facilities) in whatever activity or form, including but not limited to the use of, or the risk of presence near another person using, cardiovascular exercise equipment, dumbbells, free weights, and strength, flexibility or yoga equipment, or agility training machines or equipment. The undersigned hereby assume all risks of personal injury or illness or exercise related medical event, death, property damage or theft or other loss that might arise from participation or presence as described above.

Additionally, the Participant may be transported in a vehicle from the Nassau County Sheriff's Office to and from the Public Training Complex and/or other locations, exposed to outdoor conditions/elements such as direct sunlight, heat, humidity, rain, or cold weather for extended periods of time for any demonstration. The undersigned hereby assume all risks of personal injury, death, property damage or other loss that might arise from vehicle transportation and participation in any of the aforementioned. This General Waiver and Release of Liability (hereafter "Release") shall be binding upon the undersigned Participant and Parent/Guardian and all respective heirs, executors, administrators, personal representatives, successors, assigns, agents or employees of same. This Release will be subject to, and governed by, the laws of the State of Florida.

This Release has been read and fully understood by the undersigned Participant and Parent/Guardian. It is acknowledged and agreed the undersigned have voluntarily, knowingly, and willingly executed this Release.

Signature of Parent/Guardian of Participant

Date

Sworn to and subscribed before me this _____ day of _____ (month), 20____, by _____ (print name) who is [] personally known to me or [] produced _____ as identification, and who acknowledged to and before me that he or she executed the foregoing document freely and voluntarily for the purposes therein expressed.

Notary Public, State of Florida
My Commission Expires:

Date

TEAM for GIRLS 2026

APPLICANT INFORMATION

Name:

First

Middle

Last

Birth Date: _____ Grade Entering in School: _____

Address:

Street Address

City

State

Zip

PARENT/GUARDIAN INFORMATION

Parent / Guardian Name:

Cell phone # _____ E-mail: _____

Other Emergency Phone # _____

The student applicant has health needs or allergies that need to be considered (describe):

OPTIONAL TEAM FOR GIRLS PHOTO AND VIDEO RELEASE

The undersigned does hereby grant permission to use the likeness of myself or my child/children in photographs, video recordings or electronic images in any and all of its publications, including website entries or vehicle wraps or artwork, without payment or any other consideration. The undersigned understands and agree that these materials will become the property of the Nassau County Sheriff’s Office and will not be returned. The undersigned does hereby irrevocably authorize the Nassau County Sheriff’s Office to edit, alter, copy, exhibit, publish or distribute these images for purposes of publicizing fundraising or other Nassau County Sheriff’s Office programs or for any other lawful purpose. In addition, the undersigned does hereby waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. The undersigned expressly waives any right to royalties or other compensation arising or related to the use of my image.

Signature of Parent/Guardian of Participant

Date

Sworn to and subscribed before me this _____ day of _____(month), 20____, by _____ (print name) who is [] personally known to me or [] produced _____ as identification, and who acknowledged to and before me that he or she executed the foregoing document freely and voluntarily for the purposes therein expressed.

Notary Public, State of Florida
My Commission Expires:
