

## INDEPENDENCE DAY PARADE

## CELEBRATE 2023 WITH THE

## PRIVATEERS - ISLAND STYLE

2023 Parade Application

Contact Name:						
Organization's Name:						
Address				, ,		
			City	State		-
Email address:		@			_ •	-
Number of Participants:	Phone #: (	)	<u>=</u>			
Describe your parade entry:						
Please read the following articles	of participation.					
<ol> <li>The parade leaves COQU island cities, ending at BA</li> <li>All floats and units must ba</li> <li>You must be pre-registered greatly appreciated. A positive test goes to further of the rest goes to further of the rest goes to further of the A Release Form must be deco</li> <li>All units with a generator be certified from extinguither. All units should have a si</li> <li>The firing of black powders. The use of water balloons to All units must be motorized. As a Non-Profit 501(c)(3) solicitation, campaigning the solicitation, campaigning the signing the signing</li></ol>	AY FRONT PARK in the staged by 9:30 AN end or turn in an applied ration of all donations are mission of "Pirate submitted by each entrated in colors and started in colors and high-powered we and high-powered we and high-powered we are or peddled. No man may charge a fee on organization, we can or endorsements a must be approved by	n CITY o  M. cation in a received s for Kids atry yle befitt BC 2A-10 ng who the vater cannot arching, we request a nnot allow y the Annotal Island F	staging. En will be use and Comming the spir OB, C fire energy representations is probable walking, or a donation to a donation of the walking and a donation of the para Privateers Parivateers Pariv	try is free, ed to help to munity."  it of Independent (* See # hibited equine unit to be on an inities related land Private ade and posarades	but donation he Roser Contendence Dorand must also her and must also her al	ons are accepted and Church Food Pantry.  Day t have annual stamp or accommodated to participate cal advertising,  ceptions  ing banned from future
, , ,		-	•			
Signature:				Date	: /	/

For more information contact: Terry "Cookie" Rapert at 941-705-0199



## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THIS EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- o (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: The Anna Maria Island Privateers and/or their, officers, members, volunteers, and representatives, and the activity holders, sponsors, and volunteers;
- o (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that the AMI Privateers and their officers, members, volunteers, and representatives are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant's Signature	Date	Participant's Name (please print legibly)