



Englewood Sailing Association, Inc.

Member Name (Please Print)

Address, City, Zip

Phone (Primary and Alternate)

e-mail

I, the undersigned, in consideration of the Englewood Family Y.M.C.A., the Englewood Sailing Association, Inc. (ESA), Sarasota County and any members providing facilities, instruction, supervision and/or support in activities relating to ESA sailing programs do hereby:

1. **Assume all risk of possible danger or injury involved through participation in all ESA activities.**
2. **Request permission to participate in ESA activities with full knowledge that said activities could result in damage or injury.**
3. **Agree to indemnify and hold harmless the Englewood Family Y.M.C.A.; the Englewood Sailing Association, Inc.; and the County of Sarasota, its Commissioners, Officers, Agents, Employees and Volunteers from liability resulting from my (or a family member's) participation in said activities.**

Signature

Date