

DRAGON BOAT TEAM OF THE CHINESE AMERICAN ASSOCIATION OF CENTRAL FLORIDA, INC.  
LIABILITY RELEASE AND WAIVER AGREEMENT

In consideration of my and/or my child's participation in the activities and programs of The Dragon Boat Team of the Chinese American Association of Central Florida, Inc., (referred to as CHARGE), I, the undersigned, acknowledge, understand and agree for myself, my child, my and my child's personal representatives, assigns, heirs, and next of kin to the following:

1. Exposure to COVID-19 (as defined by the World Health Organization and any strains, variants or mutations thereof) is an inherent risk in any public place where people are present;
2. CHARGE does not guarantee that I will not be exposed during my participation in any of the activities and programs of CHARGE, including but not limited to any dragon boat practices, races and meetings;
3. I will comply with all policies and protocols of CHARGE, the Center for Disease Control and public health officials;
4. The risk of serious illness and death does exist;
5. I am currently in good physical health and condition and am at least 18 years of age; and
6. I agree to remove myself from participation and bring to the attention of the CHARGE representatives if I experience any symptoms of COVID-19.

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE KNOWINGLY AND FREELY ASSUME FULL RESPONSIBILITY FOR MY AND MY CHILD'S PARTICIPATION, SAFETY AND ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF CHARGE, its officers, directors, employees, agents and/or duly authorized representatives, successors and assigns (the "RELEASEES").

I also agree to indemnify and hold the Releasees harmless of and from any loss, liability, damage, cost of attorney fees incurred or caused by me or my child, or by my participation or my child's participation at CHARGE events and activities, including without limitation any claims for personal injury or personal property damage which may be incurred by me and/or my child. I further agree to be fully responsible for any claims and damage caused by me, and/or my child to the personal property, equipment, and physical premises of CHARGE, the Orlando Rowing Club, and/or Lakeview Club.

I certify that I am at least the age of eighteen, I have read the foregoing terms and conditions of this Liability Release and Waiver Agreement and fully understand it and understand that I have given up substantial rights by signing this Liability Release and Waiver Agreement, and have signed it freely and intend it to be a complete and unconditional release of all liability. I declare and represent that no promise, inducement or agreement not expressly made in this Liability Release and Waiver Agreement has been made to me and that the terms of this Liability Release and Waiver Agreement are contractual and not a mere recital. If applicant is under the age of 18, a parent or legal guardian must sign this form on behalf of such minor applicant.

Printed Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

**NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN**  
**In accordance with Section 744.301 F.S.**

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF CHARGE OR ITS AFFILIATES, EMPLOYEES AND AGENTS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE CHINESE AMERICAN ASSOCIATION OF CENTRAL FLORIDA ("CAACF"), THE**

DRAGON BOAT TEAM OF THE CHINESE AMERICAN ASSOCIATION OF CENTRAL FLORIDA, INC.  
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**DRAGON BOAT TEAM OF CAACF, AND ITS AND THEIR AFFILIATES, MEMBERS, EMPLOYEES AND AGENTS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND CAACF, CHARGE AND ITS AND THEIR AFFILIATES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

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Printed Minor's Name

Address

Witness

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Printed Name of Parent

Parent's Signature

Date mm/dd/yyyy