

## Jimmy Lane Surfing Academy Participant Waiver

I hereby authorize my child/custodian/self to participate in the Jimmy Lane Surfing Academy program and/or private surfing lessons. I fully understand that, as in any sport, there are inherent risks for injury while involved in this activity. I hereby hold harmless Jimmy Lane and his representative coaches, the city of New Smyrna Beach, as well as the County of Volusia from any incidents or accidents that may arise while participating in this activity. I/my child/custodian will be instructed on surfing safety and agree to use preventative measures to the best of his/her/our capabilities. I further agree that photos, videos, participant's camp art/descriptions taken during camp are the property of the Jimmy Lane Surfing Academy and may be used in future advertising.

Student Name: \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian (Print): \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

---

## Jimmy Lane Surfing Academy Participant Waiver

I hereby authorize my child/custodian/self to participate in the Jimmy Lane Surfing Academy program and/or private surfing lessons. I fully understand that, as in any sport, there are inherent risks for injury while involved in this activity. I hereby hold harmless Jimmy Lane and his representative coaches, the city of New Smyrna Beach, as well as the County of Volusia from any incidents or accidents that may arise while participating in this activity. I/my child/custodian will be instructed on surfing safety and agree to use preventative measures to the best of his/her/our capabilities. I further agree that photos, videos, participant's camp art/descriptions taken during camp are the property of the Jimmy Lane Surfing Academy and may be used in future advertising.

Student Name: \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian (Print): \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_