RELEASE OF LIABILITY & PHOTO USE FOR TROPICAL AUDUBON SOCIETY’S HIGH SCHOOL AMBASSADOR PROGRAM: BENDING THE CURVE

Program: Tropical Audubon Society’s (AUDUBON) High School Ambassador: Bending the Curve

Site: All sites related to the program including, but not limited to, Tropical Audubon Society/Steinberg Nature Center at 5530 Sunset Drive Miami, FL 33143; Shark Valley, Everglades National Park; Virtual Zoom Sessions; Transportation; etc

Dates of Participation: July 1 – July 20, 2024

Liability & Photo Release Waiver

I, adult named below as the participant and/or parent and/or legal guardian of the minor named below, wish for me/my child to participate in Tropical Audubon Society, Inc.’s (“Audubon”) program identified above (the “Program”), which may include outdoor field experiences, I state and agree as follows:

I understand that there are possible dangers associated with the Program, including, but not limited to, the use of tools as necessary. I further understand that there are inherent risks in outdoor activities, including, but not limited to, uneven ground, sharp objects, insects, and sun exposure. I understand that my/my child’s participation in the Program may involve sustained strenuous physical activity. I am/my child is in good health, and I am aware of no physical problem or condition that will limit or interfere with my/their ability to participate in the Program, or put any other participants at risk. I also acknowledge the inherent risk of exposure to COVID-19 or other viruses that exist in any public place.

I agree that I am/my child is participating in the Program at my own risk, and acknowledge that Audubon has made no warranty or representation, expressed or implied, regarding the safety of conducting the Program.

I expressly release and hold harmless Audubon and its officers, directors, employees, agents, licensees, successors and assigns from and for any and all claims, demands, actions and causes of action whatsoever for any loss, damage or injury to person or to property suffered or incurred by me/my child in connection with the Program or any aspect of it.

Furthermore, I agree and understand that photographs, which include my/my child’s image, taken at the Program may be used in Audubon’s publications for Audubon’s advertising, publicity, commercial or other business purposes. By participating in this program, I hereby give Audubon permission to duplicate and distribute the photographs, or any parts thereof which include my/my child’s image, in perpetuity in any manner and in any and all media, including the Internet, whether known now or hereafter devised. I waive any right to inspect or approve
the finished version(s). I also understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

This release shall be binding upon me/my child and our heirs, next of kin, executors, administrators and assigns. By signing below, I acknowledge that I have thoroughly read and understand this form and that the statements I have made are all true.

For participants age 18+

Participant Name (Print): ________________________________________________

Participant Signature: ________________________________________________

Date: __________________________________________________________________

For minors under the age of 18

Participant Name (Print): ________________________________________________

Parent/ Guardian Name (Print): ________________________________________________

Parent/ Guardian Signature: ________________________________________________

Date: __________________________________________________________________