

Phone ______Email ______

Product Description ______

Checks Payable to : The City of Cape Coral ______

DL#: -required for payment by check-

Credit Card Payments need call - (239)573-3128

Hold Harmless Release Form:

In participation of this event I hereby, for myself, my heirs, executors and assigns, do waive, release, and hold the City of Cape Coral harmless from all claims or causes of action for damages or personal injury suffered by me while participation in this event. Whether known or unknown, and I understand that I am assuming the risk for any damages or injury to my property or person which I may sustain while participating in this event. If I should suffer any injury or illness, I authorize the employees of the Cape Coral Parks and Recreation Department to use discretion to have me transported to a medical facility and I take full responsibility for such action. I hereby authorize the use of any photographs, video picture or other material related to the event for publicity, promotion or news purpose. Sign ature: