

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERAL RELEASE

	Submit completed form to: N/A
In consideration of, (name of passer	nger) being a passenger and/or operator ("passenger") of a State-owned
motor vehicle or watercraft (the "activity") on the date listed below, I $_$	(adult passenger's name/or legal
guardian or parent of minor passenger), agree to assume all the liabilities ar	nd inherent risks in any activity connected with the activity. The inherent
risks of the activity are: slipping and falling, drowning, collision with objects	s or people, and serious bodily injury, including death; the negligence of
others on the road or waterways, mine or my child's negligence; and failure	e to warn of an inherent risk. My or my child's participation in activity is
purely voluntary and I elect to participate or allow my child to participate in	spite of the risks. I hereby release and waive any claims or causes of such
action which I or my child may have now or hereafter against the State of	Florida, Department of Environmental Protection, and/or the Board or
Trustees of the Internal Improvement Trust Fund (collectively, the "State"),	its officers, employees, and agents, arising out of or resulting from any
damages, including injuries, illness, or claims which may be attributed to m	y or my child's participation in said activity. I further agree to indemnify
and hold harmless the State from and against all liabilities, claims damages,	, injuries, losses and expenses, including reasonable attorney's fees and
costs arising out of or resulting from my or my child's participation in said ac	ctivity.
This General Release shall be binding upon me, my heirs, personal represent	tatives, successors and assigns.
NOTICE TO THE MINOR CHIL	LD'S NATURAL GUARDIAN
READ THIS FORM COMPLETELY AND CAREFULLY. YENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YERASONABLE CARE IN PROVIDING THIS ACTIVITY. SERIOUSLY INJURED OR KILLED BY PARTICIPATING DANGERS INHERENT IN THE ACTIVITY WHICH CANNOTORM, YOU ARE GIVING UP YOUR CHILD'S RIGHT AN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDIT DAMAGE THAT RESULTS FROM THE RISKS THAT ARE ARIGHT TO REFUSE TO SIGN THIS FORM, AND STATE PARTICIPATE IF YOU DO NOT SIGN THIS FORM. Passenger Travel Date(s):	OU ARE AGREEING THAT, EVEN IF THE STATE USES THERE IS A CHANCE THAT YOUR CHILD MAY BE IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN OT BE AVOIDED OR ELIMINATED. BY SIGNING THIS NO YOUR RIGHT TO RECOVER FROM THE STATE IN NG DEATH, TO YOUR CHILD OR ANY PROPERTY A NATURAL PART OF THE ACTIVITY. YOU HAVE THE
Adult Passenger Signature on their own Behalf	Signature Date
Signature of Parent, Legal Guardian or other Person Authorized to Sign for	Signature Date
Minor/on Behalf of the Minor	
Form Received by	Date Received

DEP 55-001 Rev. 06-15-2020