



# **PLYWOOD REGATTA**

building boating's future... today!

## **NOTICE**

Teachers, participants, parents, and guardians, please be aware:

**There are two waivers in this document that  
must be signed in order to participate**

1. The first waiver is the Marine Industries Association of South Florida's **Participant Consent Form & Liability Waiver** (page 2)
2. The second waiver is The Fort's **Waiver and Release of Liability and Indemnity Agreement** (page 5)

**Waivers & Registration Forms are DUE BY SATURDAY, MARCH 28, 2026**

**Please email completed forms to [info@miasf.org](mailto:info@miasf.org) or mail to:**

Marine Industries Association of South Florida

ATTN: Plywood Regatta

221 SW 3<sup>rd</sup> Ave

Fort Lauderdale, Florida, 33312

Questions can be directed to MIASF at 954-524-2733 or [info@miasf.org](mailto:info@miasf.org)



**DUE DATE: Saturday, March 28<sup>th</sup>, 2026**



**29<sup>th</sup> Annual Plywood Regatta  
Participant Consent Form & Liability Waiver**

**THIS FORM MUST BE SIGNED PRIOR TO START OF EVENT**

In consideration of the privilege of being allowed to take part in the Marine Industries Association of South Florida's Annual Plywood Regatta, use of the equipment and the facilities of the Association, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned, individually and/or on behalf of my minor child named below do hereby agree to indemnify and hold harmless the Marine Industries Association of South Florida, its trustees, elected and appointed officials, agents, servants, volunteers and employees from and against all claims, demands, causes of action of whatsoever kind, and for any resulting judgments, losses, costs, damages, liability, expenses, including, but not limited to attorneys fee arising out of, occurring during or relating to the use of the equipment, facilities, or participation in the Marine Industries Association of South Florida's Annual Plywood Regatta.

I further acknowledge and authorize the photograph and videotape and publication of such photographs and videotapes of myself and/or my minor child to promote or publicize the Marine Industries Association of South Florida's Annual Plywood Regatta. I understand the physical requirements of participation in this activity and affirm that my child and/or I meet(s) these requirements. I give permission for coordinators, staff, and emergency personnel to make necessary first-aid decisions in the event of accident, injury, or illness. In the case of injury, accident, illness, or inability to complete these activities, I will bear the full cost of any expense incurred due to any injury to myself and/or my child or damage to my property.

All of the information on this form is true and complete to the best of my knowledge. By signing below, we release the Marine Industries Association of South Florida and all sponsors from all claims present or arising from this event. I/We understand and agree to all rules.

\_\_\_\_\_  
Name (please print) [Parent if participant is a minor]      Signature (Parent if the participant is a minor)      Date

Please complete the following information

**Participant Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Parent or Guardian Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**School/Organization Information**

School/Organization Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_ Graduation Date (mm/yy): \_\_\_\_\_ GPA: \_\_\_\_\_

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

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

Mail or drop off completed form to MIASF, 221 SW 3rd Avenue, Fort Lauderdale, FL 33312, or email to [info@miasf.org](mailto:info@miasf.org).



## **Waiver and Release of Liability and Indemnity Agreement**

In consideration of and as condition of my permission to use, today and on all future dates, My Park Initiative, LLC, sports facility located at 891 SW 34th Street, Fort Lauderdale, FL 33315 (“The FORT”), I, for myself, my heirs, personal representatives or assigns, and/or beneficiaries, and anybody claiming by, through, under or on my behalf of me acknowledge, agree and represent that:

1. I am legally competent and have full authority to sign this Waiver and Release of Liability and Indemnity Agreement.
2. I recognize and acknowledge that the Activity or Activities I will be participating in involves a risk of personal injury to myself and others.
3. I fully understand, acknowledge, and expressly assume all risk of injury (including, without limitation, permanent disability, death, and/or property damage) during the course of any Activity, however caused or arising and whether by negligence or otherwise, and accept personal responsibility for the damages following such injury, permanent disability or death.
4. I fully understand and acknowledge that THE FORT’s staff have the right to exclude individuals that are intoxicated, under the influence of drugs, or disorderly from participation in any portion of the Activities. I understand and agree that if I am excluded from participating due to intoxication, I will not receive a refund for any amounts paid and shall not have any other recourse.
5. I certify that I am in good health and do not have any health and/or mental health condition that would be aggravated by participation in any Activity or that would make such participation unsafe or otherwise inappropriate.
6. I acknowledge that the Fort has cameras that are streaming on THE FORT website and I hereby give THE FORT and its agents, affiliates, designees, and the Association of Pickleball Players (“APP”) permission to record my image and use or distribute, without limitation or obligation, my image, name, voice, and words for any purpose connected with THE FORT, including promotional, marketing, training, informational, and archival uses. I understand and agree that all photos and other materials will become the property of THE FORT and the APP and will not be returned.
7. I hereby irrevocably authorize THE FORT and the APP to edit, alter, copy, exhibit, publish, or distribute these photos and materials for any lawful purpose. In addition, I waive my right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo, image, name, voice, or words.

8. I acknowledge that this Waiver and Release of Liability and Indemnity Agreement is intended to be as broad and inclusive as permitted by the laws of the state of Florida and that if any portion of this Waiver and Release of Liability and Indemnity Agreement is held invalid, that the balance shall, notwithstanding, continue in full force and effect.

9. I release, waive, discharge, defend, indemnify and covenant not to sue My Park Initiative, LLC, My Park Hospitality, LLC, My Park Management, LLC, Association of Pickleball Players, City of Fort Lauderdale, the affiliates, parent companies, and related entities of each of the foregoing entities, and all of the respective officials, owners, officers, directors, partners, members, managers, shareholders, agents, contractors, sponsors, employees, representatives, successors and assigns of each of the foregoing entities (collectively, "Releasees"), in their official and individual capacities, from any and all claims, demands, suits, allegations, liability, losses, damage, rights, risks, or causes of action of any kind, including, but not limited to any arising from first aid treatment or service rendered in connection with the Activity, which I, anyone claiming by, through, under, or on behalf of me, or anybody else has or might have against the Releasees in connection with, arising out of, or in any way related to my participation in the Activity, including without limitation, for injuries, damages, mental anguish, or losses to persons or property (up to and including death).

10. It is expressly agreed that the release and indemnification provided for in this waiver and release of liability and indemnity agreement applies regardless of whether such claims, demands, suits, allegations, liability, losses, damage, rights, risks, or causes of action are caused in whole or in part by any act or omission, conduct, negligence, or other fault of releasees.

11. I understand and acknowledge that terms of this Waiver and Release of Liability and Indemnity Agreement are contractual and not mere recitals and that this Waiver and Release of Liability and Indemnity Agreement cannot be revoked, supplemented, modified, or amended unless such revocation, supplementation, modification, or amendment is executed in writing by the undersigned and an authorized representative of THE FORT. Finally, I acknowledge that there are no other understandings or agreements, oral or written, relating to the subject matter of this Waiver and Release of Liability and Indemnity Agreement that constitute part of this Waiver and Release of Liability and Indemnity Agreement except those specifically set forth herein.

IF YOU ARE SIGNING ON BEHALF OF A MINOR...

**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 THE FORT USES 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 FORT 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 THE FORT HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

I HAVE READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT IN ITS ENTIRETY AND FULLY UNDERSTAND ITS CONTENTS. I ACKNOWLEDGE AND AGREE THAT THIS WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT IS AN AGREEMENT NOT TO SUE THE FORT OR ANY OF ITS RELEASEES AND CONSTITUTES A COMPLETE RELEASE OF LIABILITY BY ME, MY PERSONAL REPRESENTATIVES, EXECUTORS, ASSIGNS, HEIRS, NEXT OF KIN, BENEFICIARIES, AND ANYBODY CLAIMING BY, THROUGH, UNDER OR ON BEHALF OF ME IN FAVOR OF THE RELEASEES. I ACKNOWLEDGE THAT I AM SIGNING THIS WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT VOLUNTARILY, WITHOUT COERCION, DURESS, OR UNDUE INFLUENCE AND WITH FULL KNOWLEDGE OF ITS TERMS AND EFFECTS.

**Today's Date:**

\_\_\_\_/\_\_\_\_/2026

**Participant Name:**

\_\_\_\_\_  
First Last

**Parent/Legal Guardian (if participant is a Minor):**

**Email:**

\_\_\_\_\_  
First Last

\_\_\_\_\_

**Signature of Participant or Parent/Legal Guardian:**

\_\_\_\_\_