

## **Pirates for Kids & Community**

## INDEPENDENCE DAY PARADE

CELEBRATE 2025 WITH THE

## PRIVATEERS - ISLAND STYLE

2025 Parade Application

Contact Name:									
Organization's Name:									
Address									
City State Zip									
	Email address:								
Number of Participants: Phone #: ()									
Descri	be your parade entry:								
	_								
Please	read the following articles of par	ticipation.							
2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	The parade leaves COQUINA E island cities, ending at BAY FR Staging opens at 8 am. All floats You must be pre-registered and A Release Form must be submit Float or car must be decorated in All units with a generator must or be certified by an extinguished All units should have a sign or be The firing of black powder is all The use of water balloons and healt units must be motorized or passed as Non-Profit 501(c)(3) organisolicitation, campaigning, or end The Privateers reserve the right approved by the Anna Maria Islandaria to abide by these rules could be a sign or the private of the	ONT PARK in C s and units must be entry fee paid by each entry need by each entry needs at least a beauty a 5 lb. ABC er company. Danner indicating blowed. Igh-powered water beddled. No marchization, we cannot dorsements. The to refuse a parade and Privateers. No	ITY of Appendix Services of the staged of the staged of the staged of the stage of	with the spirit of the spirit	of Indepetinguisher  (* See #1)  pited.  quine unities related	endence D r and musi 11 also) ts can be a l to politic	ay t have an accommo cal advert	annual stamp odated. cising, arade must be	
Failure to abide by these rules could result in expulsion from the parade and possibility being banned from future Anna Maria Island Privateers Parades									
	past, the Privateers did not charg rred to continue to have this para thank you for support	de, we must charg	ge an ent	ry fee goin	ng forward	d. We hop	e you un	_	
	By signing the app	lication, you agre	e to abid	e by the ar	ticles of p	participati	on.		
ç	Signature:				Date:	. /	,	/	



## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THIS EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- o (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: The Anna Maria Island Privateers and/or their, officers, members, volunteers, and representatives, and the activity holders, sponsors, and volunteers;
- (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that the AMI Privateers and their officers, members, volunteers, and representatives are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant's Signature	Date	Participant's Name (please print legibly)