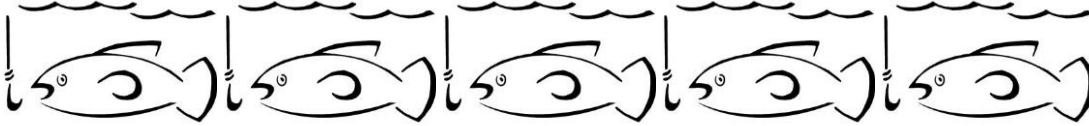




13240 Griffin Dr.  
Fort Myers, FL 33913

## Gateway Community Fishing Challenge Registration Form



Name: \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Age  6 yrs and Under     7-10 yrs old     11-15 yrs old

Telephone: \_\_\_\_\_  
Parent/  
Guardian: \_\_\_\_\_  
Email \_\_\_\_\_  
Cell phone \_\_\_\_\_

Date registered \_\_\_\_\_ Check or Money order \_\_\_\_\_

GSCDD representative \_\_\_\_\_ date \_\_\_\_\_

**I the under signed, will indemnify, defend, and hold harmless the Gateway Services District, it's agents, employees, officers, and any other associates, from and against any and all actions in law or in equity, from liability or claims for damages, demands or judgments to any person or property which may result now or in the future from the conduct of this event.**

**Furthermore, I do hereby release, discharge and hold harmless the Gateway Services District, it's officers, employees, servants and agents, of and from any and all claims, demands, actions, causes of actions and suits at law or in equity for and on account of any injuries, damages, or accidents sustained by me or any one in/ or at my party while participating in or being a spectator at any activity or event held at the facilities of Gateway Services District. I know that this is an active and participatory type activity and injuries may occur. I understand all injuries sustained and costs occurred therein must be paid for by myself or by my personal insurance company.**

**PARENT SIGNATURE** \_\_\_\_\_  
**DATE** \_\_\_\_\_



13240 Griffin Dr.  
Fort Myers, FL 33913

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## PHOTO RELEASE FORM

Gateway Services Community Development District ("GSCDD")  
13240 Griffin Drive  
Fort Myers, FL 33913  
Subject: Gateway Fishing Challenge  
Location: 11301 Gateway Blvd.

### Photo Release for Adults

I, being 18 years or older, hereby consent that the videotapes, photographs and/or motion picture film in which I appear, and/or audio recordings made of my voice may be used by the GSCDD, its assigns or successors, in whatever way they desire, including television, without compensation. Furthermore, I hereby consent that such photographs, film, negatives and recordings, and the plates and/or tapes from which they are made shall be the property of GSCDD, its assigns or successors. They shall have the right to sell, duplicate, reproduce, and make other lawful uses of such photographs, films, recordings, plates and tapes as they may desire, free and clear of any claim whatever on my part, in perpetuity.

I have read and understand and agree to the above:

Dated \_\_\_\_\_  
Signature \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Address \_\_\_\_\_

### Photo Release for Minors

I being Parent/Guardian of \_\_\_\_\_, hereby consent that the videotapes, photographs and/or motion picture film for which he/she posed, and/or audio recordings made of his/her voice may be used by GSCDD, its assigns or successors, in whatever way they desire, including television without compensation. Furthermore, I hereby consent that such photographs, films, negatives, and recordings and the plates and/or tapes or other medium from which they are made shall be the property of GSCDD, its assigns or successors, and they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, plates, and tapes as they may desire free and clear of any claim whatsoever on my part or my child's part, or by anyone who may claim by or through my child, in perpetuity.

I have read and understand and agree to the above:

Dated \_\_\_\_\_  
Signature of parent or guardian \_\_\_\_\_  
Name of Child (print) \_\_\_\_\_  
Name of parent (print) \_\_\_\_\_  
Address \_\_\_\_\_