SOUTH BROWARD DRAINAGE DISTRICT

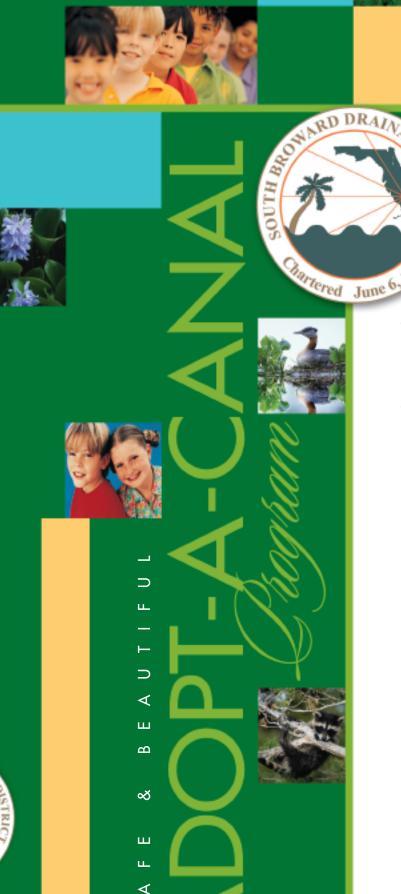
ADOPT-A-CANAL PROGRAM

WAIVER OF LIABILITY, RELEASE AND INDEMNIFICATION FORM

In consideration of the acceptance of my participation in the Program:

(Date)

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1. I,as a represer	ntative/participant of			
of the Adopt-A-Canal Program and its agents.	ee to comply with all the rules and regulations and event instructions			
2. For myself, my executors, administrators, heirs, nex	xt of kin, successors and assigns, I hereby:			
a. Waive and release any and all claims whether direct or indirect that I may have against the South Broward Drainage District, its officers, supervisors, director, volunteers, employees, agents ("the releasees") including any and all claims or loss for damage caused by any act, action, omission or negligence of any of them or any person participating in the Program, arising out of my participation in the Program and its related activities, together with any costs including attorney's fees that may be incurred as a result of any such claims, whether valid or not, and;				
b. Indemnify and hold harmless the releasees and ear more of my/our or their executors, administrators, he any costs including attorney's fees with respect thereto	ch of them against any such claim that I or my guests or any one or eirs, next of kin, successors or assigns may have or assert and against o.			
3. I hereby acknowledge that I have sole responsibility the Program and its related activities.	y for my personal possessions and equipment during participation in			
of these hazards, I therefore release the South Broward	ram carries with it potential hazards including death. With knowledge d Drainage District, its committee, their officers, supervisors, directors, and all liability surrounding any injury or my death during participation			
5. I hereby attest and verify that I am physically fit to	participate in this Program.			
6. I hereby attest and verify that I have adequate hea medical, hospitalization and related costs that I may s in the Program and its related activity.	Ith and disability insurance sufficient to cover any and all physician, sustain as a result of injury, accident or sickness during participation			
7. I hereby consent to receive medical treatment at my and/or illness during participation in the Program.	cost, which may be deemed advisable in the event of injury, accident			
8. I hereby permit the free use of my name and pictur Program.	re in broadcasts, telecasts and the press as they pertain to the			
9. I hereby acknowledge that I have received a copy read and understand said Guidelines.	of the Adopt-A-Canal Program Safety Guidelines and that I have			
(Printed or typed name of representative/participant and of parent or guardian if under the age of 18)	(Printed or typed name of Program Coordinator)			
(Signature of Participant or of Parent or Guardian if under the age of 18)	(Signature of Program Coordinator)			





ADOPT-A-CANAL

Help Keep Your Neighborhood Clean!

Dear Friend and Neighbor,

The South Broward Drainage District (SBDD) is very pleased to announce the Adopt-A-Canal program, a collaborative effort between SBDD, residents, businesses, and civic, social and educational associations and organizations. It's a great opportunity for your group to get actively involved in the community or fulfill community service hours, if required by your group. We really need you! We are looking for volunteer groups to cleanup and beautify selected canal sections no less than three times a year.

Litter and pollution in our canals is a growing and potentially hazardous problem. Litter carried by wind, traffic, animals and water can restrict water flow, pollute the water with unhealthy chemicals, trap or harm wildlife, provide a breeding ground for mosquitoes, and damage canal structures and equipment. It also negatively impacts all property values.

SBDD will supply safety equipment, life jackets, gloves, nets, litter grabbers and garbage bags. Canal sections will be approximately a half mile long and will take about 4 hours to clean. Your group will receive safety and procedural instructions prior to the first cleanup. All groups will need at least one adult supervisor for every six children under the age of 18, and all participants must be at least 12 years old.

If your group is interested, please fill out and return the attached application form. With your help, our canals and neighborhoods will be beautiful and safe for every living thing.

Please contact Pam Walsh, project coordinator, at 954-680-3337 for more information.

Sincerely,

Leo M. Schwartzberg, P.E., C.E.P. District Director



Please contact Pam Walsh, project coordinator, at 954-680-3337 for more information. South Broward Drainage District 6591 SW 160th Avenue Southwest Ranches, FL 33331



Prior to the first canal cleanup, a designated group representative should visit the adopted canal section to survey the area and find a safe meeting place.

Prior to the first canal cleanup, the designated group representative or entire group must attend an instruction and safety meeting conducted by South Broward Drainage District. Each cleanup participant must sign a liability release form.

Individuals under 18 may participate in a canal cleanup only if supervised by an adult. Groups must provide at least one adult supervisor for every six minors. All participants must be at least 12 years old.

Cleanup participants must wear a bright orange safety vest or life jacket as applicable.

Cleanups shall be scheduled during daylight hours and during fair weather. Most locations will consist of a 4 hour cleanup time period.

Cleanup participants are encouraged to take breaks, drink fluids and avoid overexertion. Groups should bring plenty of water, cell phone and a first aid kit.

Plastic bags, cups, paper, plastic bottles, small pieces of wood, etc. are just of few of the examples of items to be picked up.

Cleanup participants should document any hazardous or unsafe materials and large items (i.e. shopping carts, lumber, trees, etc.).

South Broward Drainage District shall provide life jackets, safety vest, gloves, long handled nets, litter grabbers and garbage bags.

The designated group representative must notify South Broward Drainage District 1 week before scheduled cleanup.

Bagged litter will be left in a designated location for pickup and disposal by South Broward Drainage District.

Upon completion of cleanup, the designated group representative will fill out appropriate forms and gather all equipment for return to South Broward Drainage District.

SOUTH BROWARD DRAINAGE DISTRICT ADOPT-A-CANAL PROGRAM AGREEMENT



Name of Adopting Organization:		
Designated Group Representative:		
Address:		
City:	State:	Zip:
Telephone:	_Cell Phone:	
Adopted Canal Section:		

The work will be performed under and in accordance with the South Broward Drainage District's Adopt-A-Canal general conditions and safety guidelines which is attached to this agreement.

All Adopt-A-Canal participants shall sign a liability waiver and shall at all times indemnify and save harmless the South Broward Drainage District, employees, agents and board members from responsibility, damage or liability arising from the exercise of the privileges granted under the designated program. The program designation and agreement may be terminated by the South Broward Drainage District at any time. The District reserves the right to revise or discontinue the Adopt-A-Canal program at any time.

The designated group representative and participants undersigned below have read, understand and shall comply with the Adopt-A-Canal program general conditions and safety guidelines regarding participation in the program.

Data

Adopting Organization P	articipants:	
	· 2	
3	4	
5	6	
Please remit to: South Bro	ward Drainage District	

A L . A C L D

Adopt-A-Canal Program

6591 S.W. 160 Ave.

Southwest Ranches, Florida 33331

Designated Group Representative

954-680-3337

