

RELEASE AND HOLD HARMLESS AUTHORIZATION FOR TREATMENT OF MINOR

For and in consideration of the participation in all Santa Barbara Surf Adventures, Inc. and with understanding that said participant will engage in various physical activities on the beaches and waters of the Pacific Ocean. (We), the undersigned (father and mother and/or guardian) of the said participant, a minor, do forever release, acquit, discharge and hold harmless, the Santa Barbara Surf Adventures, The Beach House, City of Santa Barbara, County of Santa Barbara, State of California, City of Ventura, its successors, officers, employees, volunteers, servants and agents from any and all actions, claims, damages, costs, loss of service, expense and compensation, on account of or in any way growing out of any and all known and unknown personal injuries and property damage which we may not or hereafter have, whether before or after he has reached his majority, resulting or to result from in the connection with or participation in and/or arising out of travel to or returning from said program. We, the undersigned, hereby acknowledge our qualifications to sign the agreement of behalf of the said minor. Furthermore, in accordance with chapter 1524, section 25.8 of the Civil Code of California, I give authorization to any physician or surgeon, licensed under the provision of Medical Practice Act, for the said participant to receive medial care and/or emergency treatment when necessary. Any expenditure for care is my responsibility.

Signature of Parent/Guardian

Print name

Date

Signature of Parent/Guardian

Print name

Date