

## MINOR LIABILITY RELEASE

I have requested the opportunity to participate in certain Activities at ZooTampa at Lowry Park (the Activities). In consideration of my being allowed to participate in the Activities, I expressly and freely agree as follows:

1. I understand that there are inherent **RISKS** involved in participating in the Activities. I agree to **ASSUME ALL RISKS**, known and unknown, of serious personal injuries, death, illnesses and/or loss of personal property resulting from or in any way connected with my attendance at or participation in the Activities.

2. I agree to **RELEASE, HOLD HARMLESS, and INDEMNIFY the LOWRY PARK ZOOLOGICAL SOCIETY AND ZOOTAMPA AT LOWRY PARK** and its parents, subsidiaries, related and affiliated companies, and all their officers, directors, shareholders, members, employees, agents, successor and assigns in their official and individual capacities (the "Released Parties") **from any and all claims, losses, demands, damages, expenses, lawsuits, causes of action and judgments**, whether foreseen or unforeseen, known or unknown, present or future, resulting from, arising out of or in any way connected with my attendance at and/or participation in the Activities (whether animals are deemed domestic or wild), including but not limited to, any claims for personal injuries, including death, illnesses and/or damage to or loss of personal property, or claims for violation of any other proprietary right I may have, **whether caused in whole or in part by the NEGLIGENCE, STRICT LIABILITY or other FAULT of the Released Parties**. I understand that this Release includes claims based upon the Released Parties own negligence or gross negligence to the maximum extent permitted by state law.

**3. NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN PURSUANT TO FLORIDA STATUTE 744.301. 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 ZOOTAMPA AT LOWRY PARK 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 ZOOTAMPA AT LOWRY PARK 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 ZOOTAMPA AT LOWRY PARK HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

4. This Release is intended to be as broad and inclusive as permitted by law and that if any term or provision of this Release shall be held invalid or unenforceable, the remaining terms of the Release shall not be affected thereby, but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same economic purposes and intention of the invalid provision.

This Release shall be binding on me, my minor child, my legal representatives, heirs, and assign in perpetuity. I have read this Release and understand it fully. I affirm I am the natural guardian of the minor child named and have the full legal authority to execute this release on my minor's behalf.

Printed Name of Minor Participant: \_\_\_\_\_

Printed Name of Natural Guardian: \_\_\_\_\_

Signature of Natural Guardian: \_\_\_\_\_

Date: \_\_\_\_\_