

# LEUCADIA SURF SCHOOL

LICENSED & INSURED

## RELEASE FROM LIABILITY FOR LEUCADIA SURF SCHOOL, THE COUNTY OF SAN DIEGO, AND THE CITIES OF ENCINITAS & DEL MAR

NAME \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

DATE(S) OF LESSON(S) OR CAMP \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY:

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

I agree to indemnify, defend, hold harmless and release from all liability Leucadia Surf School, Gerry Kantor (owner), the City of Encinitas, the City of Del Mar, and the City and County of San Diego, its elected and appointed officials, agents, employees, and volunteers, from any and all lawsuits, damages, claims, judgments, losses, liability or expenses arising out of (1) the death or personal injury or property damage to myself, my child or my ward, which may be sustained while taking a surfing lesson with Leucadia Surf School, or renting or using a surfboard or other property owned or under the control of Leucadia Surf School, or (2) any death or injury which results or increases by any action taken to medically treat me, my child, or my ward.

All of the terms above shall apply whether or not caused by the alleged negligence, whether active or passive, or any acts or omissions of Leucadia Surf School, Gerry Kantor, the City of Encinitas, the City of Del Mar, and the City and County of San Diego, or any of it's elected or appointed officers, agents, employees, or volunteers.

I fully understand the ocean is an inherently dangerous place, and surfing an inherently dangerous sport, and I fully assume all risk and responsibility for entering the ocean and for taking a surfing lesson or surf camp with Leucadia Surf School. I further state that I and/or my legal representation has examined the conditions and deemed them safe for surfing purposes.

I have read, understand and approve this Release From Liability. If the participant is a minor, the undersigned parent or legal guardian warrants and represents that this Release, its significance and the assumption of risk, has been explained to and understood by my minor child or ward. I hereby declare, under a penalty of perjury, that I am the parent or legal guardian of the named participant.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(Signature of parent or guardian for students under 18 years of age.)

**THE ABOVE INFORMATION ALWAYS REMAINS PRIVATE!  
THIS INFORMATION NEVER LEAVES THIS FORM!**

HOW DID YOU HEAR ABOUT LEUCADIA SURF SCHOOL? \_\_\_\_\_

**WWW.LEUCADIASURFSCHOOL.COM**

**(760) 635-SURF(7873)**

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