



*Seat Belt Convincer Indemnification Agreement*

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The below listed and signed participant/parent, hereinafter referred to as the **Permittee**, hereby agrees and promises to indemnify and hold harmless the Florida Sheriffs Association, the Leon County Board of County Commissioners, the Leon County Sheriff, the Leon County Sheriff's Office and their officers, deputies, agents, servants or employees, from and against any and all liability, claims, demands, expenses (including attorney's fees), fee, fines, penalties, suits, proceedings, actions and causes of action of any kind and nature arising or growing out of or in any way connected with the use, occupancy, maintenance, or control of the seat belt convincer owned and being demonstrated by the Leon County Sheriff, whether on, in or about aforesaid seat belt convincer or resulting from injury to person, property, or loss of life or property of any kind or nature whatsoever sustained during any time period when the Leon County Sheriff is allowing the **Permittee** to participate in the demonstration of the seat belt convincer, which is the consideration for the promises and covenants herein made and agreed to by the **Permittee**.

Dated this \_\_\_\_\_ (day) of \_\_\_\_\_ (month), \_\_\_\_\_ (year)

Having requested permission to ride the seat belt convincer being demonstrated by the Leon County Sheriff's Office, I do hereby certify as follows:

1. I am at least eighteen (18) years of age or have obtained signatures from parent(s) permitting me to ride. (At least one parent/legal guardian must sign this agreement and it must be given to Instructor for retention.)
2. I am at least 4 foot 9 inches tall (The seat belt will not configure for less height.)
3. I am not pregnant. (if female)
4. I am not suffering from a back ailment or injury.
5. I am not recovering from any recent injury or surgery.
6. I have removed eye glasses or contact lenses, if any, and all object from my pockets.

\_\_\_\_\_  
Permittee's Printed Name

\_\_\_\_\_  
Permittee's Signature

\_\_\_\_\_  
Parent's Printed Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Instructor's Printed Name

\_\_\_\_\_  
Instructor's Signature