



## VEHICLE OWNER'S STATEMENT OF PERMISSION AND RELEASE OF ALL CLAIMS



Student name: \_\_\_\_\_

I hereby certify that I am the owner of the vehicle, which the above-named student intends to use while taking the Collision Avoidance Training course offered by Sarasota County Sheriff's Office consent to such use. I hereby certify that this vehicle is in good working order, including the vehicle's engine, brakes, suspension, steering, and tires. I understand that the training course involves moving vehicles being operated by an inexperienced driver and that damage may occur to the vehicle or to the other vehicles involved in the course.

I HEREBY RELEASE AND AGREE TO HOLD HARMLESS FROM LIABILITY FOR ANY AND ALL CLAIMS, DEMANDS, DAMAGES, ACTIONS, CAUSES OF ACTION, INCLUDING ANY ACTS OF NEGLIGENCE, OR SUITS IN EQUITY, OF WHATSOEVER KIND OR NATURE, THE PARTNERS FOR HIGHWAY SAFETY FOUNDATION, INC., THE SARASOTA COUNTY SCHOOL DISTRICT, THE SCHOOL BOARD OF SARASOTA COUNTY, THE SARASOTA COUNTY BOARD OF COUNTY COMMISSIONERS, THE OFFICE OF SHERIFF OF SARASOTA COUNTY, FLORIDA, THEIR OFFICERS, EMPLOYEES, INSTRUCTORS, AGENTS OR APPARENT AGENTS, AND OTHER PARTICIPANTS IN THE COURSE.

(These forms may be signed before either a SSO representative OR a notary public, whichever is more convenient. You must attach copies of the current vehicle registration and insurance card to this form.)

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SSO Representative  
(Witness)

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Vehicle Owner's Signature

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Witness Name Printed

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Owner Name printed

STATE OF FLORIDA  
COUNTY OF SARASOTA

BEFORE ME personally appeared \_\_\_\_\_, to me well known to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that he/she executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, .

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NOTARY PUBLIC

Personally known: \_\_\_\_\_  
Provided \_\_\_\_\_ as Identification

My Commission Expires: