

Tampa Bay Rocketry Association
The Tampa Area Organization of Non-Professional Rocketry
Prefecture 17 of Tripoli Rocketry Association
Section 934 of the National Association of Rocketry

GROUP LAUNCH REQUEST

In order to accommodate groups wishing to attend a TBRA launch event, the following procedures must be followed.

1. A request to attend as a group must be made to the TBRA Group Manager a minimum of two (2) weeks in advance of the scheduled launch event. The request must include the group name, group leader's name, approximate number of attendees, and the approximate time of arrival.
2. Each adult person attending, whether as a participant or a spectator, must sign the TBRA Release and Waiver of Liability. These must be presented to the Group Manager or Range Safety Officer (RSO) on or before the day of the event.
3. Any attendees under the age of eighteen (18) must have a TBRA Minor Liability Waiver signed by a parent or legal guardian.
4. College/University teams must complete the College/University Team Information form.
5. The group leader shall be responsible for the supervision and conduct of the group attendees.
6. Required forms may be reproduced as needed.

Use and disclosure of privacy information.

The Tampa Bay Rocketry Association (TBRA) collects specific personal information for internal use only. The information collected will never be provided to any other individual or organization.

This information will be used to determine your status and eligibility to participate in TBRA activities.

Email and/or telephone numbers will be used only to send important messages concerning TBRA, such as last minute launch cancellations.

Disclosure of required information is voluntary. However, if you do not provide the requested information, you will not be allowed to participate in TBRA launch events.

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Group Launch Request

Group Name: _____ Sponsor Organization: _____

Group Leader: _____

Address: _____ City/State: _____ ZIP: _____

Home Phone: (____) ____ - _____ Work Phone: (____) ____ - _____ Cell Phone: (____) ____ - _____

Date of Birth: ____ / ____ / ____ Age: _____
If under Eighteen E-Mail Address: _____
E-Mail address is optional, and will be only used for TBRA notification

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

GROUP MEMBERS

Name: _____ Age: _____ Date of Birth: ____ / ____ / ____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Name: _____ Age: _____ Date of Birth: ____ / ____ / ____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Name: _____ Age: _____ Date of Birth: ____ / ____ / ____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Name: _____ Age: _____ Date of Birth: ____ / ____ / ____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Name: _____ Age: _____ Date of Birth: ____ / ____ / ____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: _____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: _____

Date: ____ / ____ / ____ Signature of Group Leader: _____

GROUP MEMBERS (continued)

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

Name: _____ Age: _____ Date of Birth: ____/____/____
If under Eighteen

TRA Member: Yes / No TRA Number: _____ Expires: _____ Certification Level: ____

NAR Member: Yes / No NAR Number: _____ Expires: _____ Certification Level: ____

TBRA Release of Liability

TBRA requires all everyone **over** the age of eighteen (18) read and sign the Release of Liability. In addition, TBRA requires that everyone **under** the age of eighteen (18) must have a valid release of liability signed by a parent or legal guardian.

These documents protect the landowner and TBRA.

If you do not agree with these requirements, you will not be allowed to attend a TBRA launch event.

TBRA

TAMPA BAY ROCKETRY ASSOCIATION

Release, Waiver of Liability and Indemnity Agreement

This document waives important legal rights, read it carefully before signing.

In consideration for receiving permission to attend as participant, spectator or guest, the Tampa Bay Rocketry Association (TBRA) ongoing regular monthly rocket launch event, at the **SAND HILL SCOUT RESERVATION**, I hereby RELEASE, WAIVE, DISCHARGE, COVENANT NOT TO SUE AND HOLD HARMLESS: the SAND HILL SCOUT RESERVATION, it's officers, members, agents, successors and assigns; and the **TAMPA BAY ROCKETRY ASSOCIATION**, the **GREATER TAMPA BAY AREA COUNCIL**, **SCOUTING AMERICA**, it's officers, members, agents, successors and assigns; **THE TAMPA BAY ROCKETRY ASSOCIATION**, it's officers, members, agents, successors and assigns; **(RELEASED PARTIES)** from any and all liability, claims, demands, action, judgements, costs, expenses, court costs, attorney fees, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, **WHETHER CAUSED BY THE**, including but not limited to, **SOLE**,

I hereby elect to voluntarily participate in said activity, and to enter the above-names premises and engage in such activity knowing that certain risk of harm are or may be inherent in the various activities contemplated herein and that the activity may be hazardous to me and my property. I **VOLUNTARILY ASSUME FULL RESPOSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH**, that may be sustained by me, or to any loss or damage to property owned by me, as a result of being engaged in such activity, **WHETHER CAUSED BY THE**, but not limited to, **SOLE CONTRIBUTORY OR GROSS NEGLIGENCE OF THE RELEASED PARTIES** or otherwise.

I further hereby **AGREE TO INDEMNIFY AND HOLD HARMLESS** the **RELEASED PARTIES** from any loss, liability, damage, demands, liens, judgements or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, **WHETHER CAUSED BY OR CONTRIBUTED TO IN WHOLE OR PART** by any action or failure to act, negligence breach of contract, or other misconduct on the part of the **RELEASED PARTIES** or otherwise.

It is my express intent that this Release, Waiver of Liability and Indemnity Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, personal representatives, executors and assigns, if I am deceased, and shall be deemed as a **RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE** the above named **RELEASED PARTIES**, I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Florida.

I expressly agree that this Release, Waiver of Liability and Indemnity Agreement is intended to be as broad and inclusive as is permittee by laws of the State of Florida, and if any portion of this Agreement is held to be invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

In signing this release, each of the undersigned hereby acknowledge and represents the following:

1. That he or she has read the foregoing Release, Waiver of Liability and Indemnity Agreement, and understands that he or she is assuming liability and indemnifying as to any minor's injury or damage.

2. They are at least eighteen (18) years of age and fully competent; and execute the release for full, adequate, and complete consideration fully intending to be bound by same.
3. All participants/attendees are listed on the waiver.
4. Alcohol will not be consumed at any time during launch operations. Doing so will result in expulsion from the property.
5. Violation of this agreement will result in expulsion of participants/attendees and forfeiture of all fees paid.
6. Abide by the rules, policies, and instruction of TBRA Officers and Landowner or designate.
7. Consent to TBRA and/or any other media outlets to use photographs and video images in their publications and websites of participants, friends and/or family including minors under the age of 18 in the undersigned's party without financial compensation.

NOTICE TO MINOR CHILD'S NATURAL GUARDIAN
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 RELEASEES USE 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 RELEASEES IN 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 RELEASEES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

UNDER PENALTY OF PERJURY, I ACKNOWLEDGE HAVING READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND BY HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Signature _____

Printed Name _____

Date _____

Additional Participants/Attendees

FOR A PARTICIPANT OR ATTENDEE UNDER THE AGE OF 18 YEARS, THE PARENT WITH LEGAL CUSTODY OR THE MINOR'S LEGAL GUARDIAN MUST SIGN THIS RELEASE FORM AND PROVIDES THE MINOR'S AGE AND BIRTHDATE.

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____

Name _____ Age _____ Birthdate ____ / ____ / ____
If under Eighteen If under Eighteen

Signature _____ Date ____ / ____ / ____