## Florida Sheriffs Association Teen Driver Challenge

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

Student name:	<del>_</del>	
I hereby certify that I am the owner of the vehicle, which the above-named student intends to use while taking the FSA Teen Driver Challenge Training course offered by Volusia Sheriff's Office and 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 FLORIDA SHERIFFS ASSOCIATION, THE VOLUSIA COUNTY BOARD OF COUNTY COMMISSIONERS, THE OFFICE OF SHERIFF OF VOLUSIA COUNTY, FLORIDA, THEIR OFFICERS, EMPLOYEES, INSTRUCTORS, AGENTS OR APPARENT AGENTS, AND OTHER PARTICIPANTS IN THE COURSE.		
	riff's Office representative OR a notary public, whichever the current vehicle registration and insurance card to this	
Sheriff's Office Representative (Witness)	Vehicle Owner's Signature	
Witness Name Printed	Owner Name printed	
STATE OF FLORIDA COUNTY OF		
known to be the person described in a	d, to me well and who executed the foregoing instrument, and ne executed said instrument for the purposes therein	
WITNESS my hand and official seal	l this, 20	
NOTARY PUBLIC		
Personally known: Provided	as Identification	
My Commission Expires:		