



STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

RELEASE AND AUTHORIZATION

In consideration of, and effective upon the date of award to me of the 1<sup>st</sup> Prize in the Ultimate Seminoles® Experience promotion and other good and valuable consideration, I release and forever discharge the Florida Lottery and its employees and agents from any and all claims, demands, losses and liabilities, of any nature whatsoever, which I may be entitled to assert, including but not limited to, claims for injury, death, or illness, arising out of the award, receipt or use of said prize. I also authorize the release of my name, street address, and telephone number to Seminole ISP Sports Network and other third parties as necessary for prize fulfillment.

I understand and agree that this is a complete RELEASE and DISCHARGE of all claims and rights I may have against the aforesaid party to be released and that no action will be taken by me, or on my behalf, with respect to any such claims or rights, it being understood that the Release shall be binding upon my heirs, executors or administrators.

I have completely read this Release and Authorization and fully understand its terms.

\_\_\_\_\_  
Signature

SWORN TO AND SUBSCRIBED before me this \_\_\_\_ day of \_\_\_\_\_, 200\_, by

\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

Personally known \_\_\_\_\_

or

Produced identification \_\_\_\_\_

Type \_\_\_\_\_