SKATE WAIVER & RELEASE FORM

PARTICIPANT RELEASE OF LIABILITY—READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the skate area at Denver Baptist Church, related events, activities, and all other sanctioned parks and events the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/ or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my/ our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE West Cabarrus Church, and its officers, officials, ministers, leaders, volunteers, agents, and/ or employees, other participants, sanctioned events, sanctioned parks, sanctioned organizations, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself and on behalf of my/ our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent of the law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I attest that I am physically fit for this activity. I also waive and release the use of my photograph or likeness for any reason or purpose. I WANT TO PARTICIPATE IN THIS HAZARDOUS SPORT!

_____ _____ _____

PARTICIPANT SIGNATURE DATE SIGNED DATE OF BIRTH

Name: _____ Form of ID: _____

Address: _____ Apt. #: _____ E-Mail: _____

City: _____ State: _____ Zip: _____ Phone: _____

IF PARTICIPANT IS UNDER 18 YEARS OF AGE Emergency Phone: _____

_____ _____ _____

PARENT/ LEGAL GUARDIAN SIGNATURE DATE SIGNED DRIVER LICENSE #

_____

PRINT PARENT/ LEGAL GUARDIAN NAME

MEDICAL RELEASE: In the event that I cannot be reached in an emergency, I hereby give permission to any licensed physician, surgeon, clinic, or hospital to secure proper treatment, and to order anesthesia, for my child/ myself as named above. My child/ I am allergic to the following medications: _____

DOCTOR to be notified in case of emergency: _____

Legal Guardian/ Parent or +18 year participant signature _____

WITNESS SIGNATURE _____ DATE SIGNED _____

TITLE AND ORGANIZATION, EVENT OR PARK: _____

SIGNATURE MUST BE NOTARIZED UNLESS WITNESSED BY AN EMPLOYEE OF DENVER BAPTIST CHURCH