

OLLIE'S SKATE PARK

(Please Print)

NAME: _____ DOB: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ CELL PHONE: _____

WORK PHONE: _____

EMERGENCY CONTACTS AND PHONE: _____

INLINE: ___ SKATEBOARD: ___ (PRO TO CHECK) BEGINNER: ___ INTERMEDIATE: ___ ADVANCED: ___

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY READ BEFORE SIGNING

IN CONSIDERATION OF BEING ALLOWED TO PARTICIPATE IN ANY WAY IN THE **OLLIE'S SKATE PARK** ATHLETIC/SPORTS PROGRAM, RELATED EVENTS AND ACTIVITIES, I _____ THE
(NAME OF PARTICIPANT)

UNDERSIGNED ACKNOWLEDGE, APPRECIATE AND AGREE THAT:

- 1.) The risk of injury from the activities involved in this program is significant, including the potential to permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury 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 to my participation: and ,
- 3.) I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, will remove myself from participation and bring such to the attention of the nearest official immediately: and,
- 4.) I, for myself and behalf of my heirs, assigns, personal, and representatives, and next of kin, **HEREBY RELEASE AND HOLD HARMLESS, OLLIE'S SKATE PARK**, their officers, officials, agents and/or employees, other participants, 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, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

X _____ AGE : _____ DATE SIGNED: _____

**FOR PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by KENTUCKY law.

X _____ DATE: _____ EMERGENCY PHONE: _____
PARENT/GUARDIAN SIGNATURE

OLLIE'S EMPLOYEE WITNESS: _____ NOTARY: _____