St. Petersburg Regional Skatepark 1 Year Anniversary Event Liability Release Form

In consideration of being allowed to participate in any way in the St. Pete Skatepark Alliance event Saturday June 1, 2019 (St.Petersburg Regional Skatepark 1 Year Anniversary Event), or related events and activities. Please print participant's name:

(Participants Name) The undersign acknowledge, appreciate and agree that: 1. The risk of injury from the activities involved in this event is significant, including the potential for permanent paralysis and death, & while particular r 2. Equipment and personal discipline may reduce the risk, the risk of serious injury does exist; and, 3. I KNOWINGLY & FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, & assume full responsibility for my participation; and, 3. I willingly agree to comply with stated & customary terms & conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation & bring such hazard to the attention of the nearest staff - member immediately; and, 4. I, for myself & on behalf of my heirs, assigns, personal representatives & next of kin, HEREBY RELEASE AND HOLD HARMLESS St. Pete Skatepark Alliance and the City of St.Petersburg, their officers, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, & if applicable, owners and lessors of premises used to conduct the event ("release"), WITH RESPECT TO ANY & 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 & assumption of risk agreement. I fully understand its terms, understand that I have given up substantial rights by signing it & sign it freely and voluntarily without any inducement. _____ AGE: _____ DATE: _____

(Participant's signature only if over 18 years of age)

FOR PARTICIPANTS UNDER THE AGE OF 18 AT TIME OF REGISTRATION This is to certify that I, as participant's parent/legal guardian, do consent and agree to his/her release as provided above of all Releases, & for myself, my heirs, assigns, & next of kin, I release & agree to indemnify Releases from any and all liabilities incident to my minor child's involvement of participation in the event as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

(Parent or legal guardian signature) (Print Name of Parent or Legal Guardian)

Address	_City/St/Zip
Emergency Phone Number	• •
Emergency Phone Number	
Email Address	

St.Pete Skatepark Alliance and City of St.P	Petersburg . Waiver and Release of liability continued.	
Parents' or Guardians Additional Indemnificat	tion Must be completed for participants under the age of 18	3
by parent or legal guardian only. If parent or le	egal guardian is not present waiver must be notarized. In	
consideration of (print minor's name) ("Minor"	r") being Permitted to participat	te
in its activities and to use its equipment and fac	acilities, I further agree to indemnify and hold harmless St.	
Pete Skatepark Alliance and the City of St.Pete	ersburg from any and all claims which are brought by, or o	n
behalf of Minor, and which are in any way con	nnected with such use or participation by Minor. Parent's o	r
Guardians		
Signature	Date//	
Relationship to Minor		
Print First Name		
Print Last Name		
Drivers License Number		
State		
If PARENT /LEGAL GUARDIAN IS NOT PI	RESENT FORM MUST BE NOTERIZED. Notary Stamp:	:
Notary Signature	Notary Date//	
Email Address:		