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 program is significant, including the potential for permanent paralysis and death, & while particular risk is involved I fully understand that serious injury may occur 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 programs 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/City of St.Petersburg	. Waiver and Release of liability continued. Parents'
or Guardians Additional Indemnification Must be co	ompleted for participants under the age of 18 by parent
or legal guardian only. If parent or legal guardian is	not present waiver must be notarized. In consideration
of (print minor's name) ("Minor")	being Permitted by St.Pete Skatepark
	equipment and facilities, I further agree to indemnify
and hold harmless St. Pete Skatepark Alliance and th	he City of St.Petersburg, from any and all claims which
are brought by, or on behalf of Minor, and which are	e in any way connected with such use or participation
by Minor. Parent's or Guardians	
Signature	Date//
Relationship to Minor	
Print First Name	
Print Last Name	
Drivers License Number	
State	
If PARENT /LEGAL GUARDIAN IS NOT PRESE	ENT FORM MUST BE NOTERIZED. Notary Stamp:
Notary Signature	Notary Date//
Email Address:	