School of Skatin LLC Liability Release Form

In consideration of being allowed to participate in any way in the School of Skatin LLC programs, 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 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 School of Skatin LLC, 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 al
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)
AddressCity/St/Zip
Emergency Phone Number
Emergency Phone Number
Email Address:
Eman Address.
School of Skatin LLC. `Waiver and Release of liability continued. Parents' or Guardians Additional
Indemnification Must be completed 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 School of Skatin LLC., to participate in its
activities and to use its equipment and facilities, I further agree to indemnify and hold harmless School of
Skatin LLC., from any and all claims which are brought by, or on behalf of Minor, and which are in any
way connected with such use or participation by Minor. Parent's or Guardians
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Signature Date// Relationship to Minor
Drint First Name
Print First Name
Print Last Name
Drivers License Number
State
If PARENT /LEGAL GUARDIAN IS NOT PRESENT FORM MUST BE NOTERIZED. Notary Stamp:
Notary SignatureNotary Date/