



**AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY  
READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the OIL CITY SKATE PARK athletic/sports program, related events and activities, I, \_\_\_\_\_ the undersigned, acknowledge, appreciate and agree that:

The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist: and,

I KNOWLINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation: and,

I willingly agree to comply with the stated customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately: and,

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS OIL CITY SKATE PARK and OIL CITY ENTERTAINMENT, INC., their successors, their officers, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.

I Understand helmets are an important safety requirement and if I remove my helmet it is at my own risk. I also understand that breach of any rules may cause my ejection from the premises with no refund of admission.

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.

X \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed \_\_\_\_\_

PARTICIPANT'S SIGNATURE \_\_\_\_\_ (if 18 and over)

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

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases 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 RELEASES, to the fullest extent permitted by law.

X \_\_\_\_\_ (Signature of Parent or Guardian)

\_\_\_\_\_ PRINT YOUR NAME

PARENT/GUARDIAN'S EMERGENCY PHONE#(S)

(H) \_\_\_\_\_ (cell) \_\_\_\_\_

Home Address \_\_\_\_\_ Town & Zip \_\_\_\_\_

Email Address \_\_\_\_\_