



State of Confusion Skatepark Agreement for Waiver and Release...



Assumption of Risks and Indemnification

This document affects your legal rights. Please read carefully.

No membership will be granted without proper completion of this document.

I, the MEMBER being above the age of 18, or the PARENT of the member, who is under the age of 18, agrees as follows: I understand and acknowledge that skateboarding, is a hazardous and dangerous activity that requires strenuous exercise and various degrees of skill and experience for the different skating surfaces and venues. I understand that these activities can result in serious injury to the person and damage to property and voluntarily assume any and all risk of loss, damage, or injury while on State of Confusion Skatepark premises. I am aware of the risks, hazards, and dangers of personal injury, death, and liability inherent in entering the premises as well as those inherent risks, hazards, and danger of personal injury, death, and disability in participation in any skating event. I am aware that the usual risks, hazards, and danger of personal injury, death, and disability increase when using ramps, curbs, steps, half pipes, inclines and declines, rails or any other structure or device. I also understand that these risks, hazards, and dangers are further increased when other persons of any level of experience or skill are using the same facility. In consideration for the admission, viewing privileges and the use of the facilities at State of Confusion Skatepark (S.O.C.), I hereby agree to release and forever discharge S.O.C., and their agents, servants, employees, officers, directors, trustees, and all other persons or entities acting on their behalf, from any and all claims, actions, damages, liability, costs or expenses, and attorney fees which are related to, arise out of, or are in any way connected to my participation or use of the skatepark facility (in both exterior and interior), use of equipment or property supplied by S.O.C., or my presence upon the premises. By the agreement, it is my intention to surrender and waive any rights to sue or exercise any legal right to seek damages from S.O.C., State of Confusion skateshop, and its agents, servants, employees, officers, directors, trustees, and all other persons or entities acting on their behalf. I acknowledge that my participation in activities at S.O.C. is strictly voluntary in spite of the risks and dangers, and that no one is forcing me to participate. I agree to indemnify, hold harmless and defend S.O.C. and their agents, servants, employees, officers, directors, trustees, and all other persons or entities acting on their behalf, from any and all claims, actions, damages, liability, costs or expenses, and attorney fees of any spectator, other member, or third party in connection with or arising out of my involvement or participation in any activity at S.O.C. I give consent and permission to S.O.C. to obtain on the behalf of my minor child or myself any emergency medical treatment in case of sickness, accident, or injury and to secure such medical attention at my expense. I agree that this agreement shall apply to my participation in any and all S.O.C. activities and programs, including, but not limited to open skating, skateboarding, practice sessions, competitions, and activities directed by any representative of S.O.C. This agreement shall apply to all my future visits to S.O.C. This agreement shall be effective and binding upon my heirs, agents, personal representatives, and assigns. I hereby certify that I am over 18 years of age, I have carefully read the foregoing and acknowledge that I understand and agree to all the above terms and conditions. Prior to signing this agreement, I have had the opportunity to ask any and all questions. I am aware by the signing of this agreement, I assume all risks and waive and release certain substantial rights that I may have or possess.

MEMBERS NAME: _____ MEMBERS D.O.B. _____ PARENT/ GUARDIAN NAME: _____

ADDRESS: _____ CITY : _____ STATE: _____

ZIP: _____ HOME PHONE: _____

EMERGENCY CONTACT#1: _____ TELEPHONE #: _____

EMERGENCY CONTACT#2: _____ TELEPHONE #: _____

MEMBER SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

NOTARY SIGNATURE _____ DATE: _____

<p>NOTARY STAMP</p>
