

COVID-19 Liability Waiver

2020-2021 Season

In consideration of being allowed to participate in any way, in any events at SKATE Training Facility, I the undersigned, acknowledge, appreciate, and agree that:

- 1. The risk of injury from the activities in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injuries does exist. In addition, participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the serious illness and death does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation in regard to protection against infectious diseases. If, however, I observe any unusual or 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,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, AND HOLD HARMLESS SKATE Training Facility, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss of damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

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 VOLUNARILY WITHOUT ANY INDUCEMENT.

Name of Participant: ______ Participant signature: _____

Date of Birth:	Date Signed:
FOR PARTICIPANTS OF MIN	DRITY AGE
for this participant, have read a including the risks of presence or rules and regulations for protect understands and accepts these and agree to his/her release prodo release and agree to indem from my minor child's/wards presence.	TRATION) This is to certify that I, as parent/guardian, with legal responsibility dexplained the provisions in this waiver/release to my child/ward departicipation and his/her personal responsibilities for adhering to the on against communicable diseases. Furthermore/my child/ward isks and responsibilities. I for myself, my spouse, and child/ward doconsent ided above for all the Releasees and myself, my spouse, and child/ward fy and hold harmless SKATE Training Facility, for any and all liabilities arising ence of participation in these activities as provided above, EVEN IF E, to the fullest extent provided by law.
Name of Parent/Guardian:	Signature of Parent/Guardian:
Date Signed:	Emergency Phone Numbers: