

SKATEAWAY - Whitehall

CONSENT RELEASE AND WAIVER OF ALL CLAIMS

I ACKNOWLEDGE BY SIGNING THIS AGREEMENT I HAVE BEEN GIVEN THE FULL OPPORTUNITY TO ASK ANY QUESTIONS THAT I MAY HAVE ABOUT HOCKEY AT SKATEAWAY. ALL MY QUESTIONS HAVE BEEN ANSWERED TO MY FULL AND TOTAL SATISFACTION. I SPECIFICALLY ACKNOWLEDGE THAT I HAVE BEEN ADVISED OF THE FACTS AND MATTERS SET FORTH BELOW AND I AGREE AS FOLLOWS:

1. I ACKNOWLEDGE THAT I ACT AT MY OWN RISK.
2. I ACKNOWLEDGE THAT I WILL NOT HOLD SKATEAWAY, ITS REPRESENTATIVES, OR ITS EMPLOYEES RESPONSIBLE FOR ANY INJURY THAT MAY OCCUR WHILE ACTING ON SKATEAWAY PROPERTY.
3. I ACKNOWLEDGE THAT I HAVE CHOSEN TO SKATE/OR ACT ON MY OWN FREE WILL. TO MY KNOWLEDGE I DO NOT HAVE ANY PHYSICAL, MENTAL, OR MEDICAL IMPAIRMENT, OR DISABILITY WHICH MIGHT AFFECT MY WELL BEING AS A DIRECT RESULT OF MY DECISIONS TO CHOOSE TO SKATE AND/OR PARTICIPATE IN ANY ACTIVITY AT SKATEAWAY.
4. I ACKNOWLEDGE THAT I HAVE TRUTHFULLY REPRESENTED TO THE EMPLOYEES, AND REPRESENTATIVES OF SKATEAWAY THAT I AM OVER EIGHTEEN YEARS OF AGE AND THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT.
5. I ACKNOWLEDGE THAT SKATING OR PARTICIPATING IN OTHER EVENTS ARE MY OWN CHOICE ALONE AND I CONSENT TO CONDUCT MYSELF IN A MANNER WHICH WILL HELP AVOID INJURIES TO MYSELF OR OTHER PERSONS.
6. I AGREE TO RELEASE AND FOREVER DISCHARGE AND HOLD HARMLESS SKATEAWAY AND ITS EMPLOYEES FROM ANY AND ALL CLAIMS, DAMAGES, LEGAL ACTIONS ARISING FROM OR CONNECTED IN ANY WAY WITH MY SKATING AND/OR PARTICIPATING CHOICE TO DO SO.

YOU MUST BE AT LEAST EIGHTEEN YEARS OLD TO COMPLETE THIS WAIVER.

PLEASE PRINT

DATE: _____ YEAR OF BIRTH: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMERGENCY CONTACT: _____ PH. #: _____

SIGNATURE: _____

SIGNATURE OF PARENT IF UNDER 18: _____

SKATEAWAY Roller Rink – Whitehall
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