

ADULT

CC Shreveport Waiver and Release of Liability and Consent to Medical/Dental Treatment Form

Participant's
Last Name _____ First _____ M.I. _____ Phone _____

Address _____ City _____ State _____ Zip _____

Birth Date ____/____/____ Age ____ Grade ____ Does Participant have medical ins.? Yes No Insurance Co. _____ Policy # _____

Insurance Any Shreveport Hospital
applies at: _____

Specified Shreveport Hospital	Emergency Contact	Phone	Relationship

In consideration of being allowed to participate in Calvary Chapel Shreveport activities and events (hereinafter "SK8"), I acknowledge, understand and agree that:

- 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent disability or death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury 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 (named in # 5 below) or others, and assume full responsibility for my participation and for wearing a helmet; and,
- 3) I willingly agree to comply with the stated and 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 hazard to the attention of the nearest SK8 staff person immediately; and,
- 4) I give my consent and permission for SK8 staff to obtain any emergency medical/dental treatment for myself at any hospital in case of sickness, accident or injury and to secure such medical/dental attention at my expense whether or not my insurance applies; and,
- 5) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY AND HOLD HARMLESS SK8, its officers, agents, employees, volunteers, (the "RELEASEES"), and other participants, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I AM AT LEAST 18 YEARS OF AGE AND 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.

SIGNATURE _____

DATE SIGNED _____

SK8 STAFF ONLY: Form/ ID Checked by: _____

ADULT PARTICIPANT ID
Check: (circle one) Drivers License DMV ID card Passport

ADULT PARTICIPANT ID # _____

A D U L T P A R T I C I P A N T

IN ORDER FOR PARTICIPANT TO SKATE/RIDE, PLEASE DO THE FOLLOWING:

- 1) COMPLETELY FILL OUT THE FORM ON THE BACK OF THIS SHEET.
- 2) READ AND SIGN THE FORM
 - Signatures must be witnessed by Skatechurch Staff.
- 3) PROVIDE PROPER ID.
 - Adult participants must provide current signed photo ID (Drivers license, DMV ID, or Passport).
- 4) MAINTAIN POSTIVE VIBES
 - No profanity or throwing boards.
- 5) BRING HELMET. Participants are encouraged to wear a helmet. Loaner helmets are available. THOSE WHO CHOOSE NOT TO WEAR A HELMET DO SO AT THEIR OWN RISK. POTENTIAL INJURIES INCLUDE PERMANENT DISABILITY OR EVEN DEATH.
- 6) SKATEBOARDS, INLINE SKATES AND SCOOTERS ARE PERMITTED. BMX RIDERS ARE NOT PERMITTED AT THIS TIME.
- 7) Download the Calvary Chapel Shreveport app or visit www.ccschreveport.org to stay up to date on session times and days.