

# Skate Like a Girl

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# Medial Release / Liability Waiver



gals grab your boards! let's roll **from never-eva to forever-eva**

**IF YOU ARE UNDER 18, YOUR PARENT OR LEGAL GUARDIAN MUST SIGN THIS WAIVER!  
PARTICIPANT RELEASE OF LIABILITY-READ BEFORE SIGNING**

## Registration Information

Participant's Name / DOB	
Participant Phone Number	
Participant Email	
Participant Address	
Emergency Contact Name	
Relationship / Telephone #	

## Safety Policy

**SKATE LIKE A GIRL REQUIRES THAT ALL PARTICIPANTS MUST WEAR HELMETS AT ALL TIMES. THIS IS NON NEGOTIABLE.  
WE STRONGLY ENCOURAGE THAT ALL SAFETY EQUIPMENT BE WORN DURING THE CLINIC.**

## Medical History + Authorization

Please provide any other pertinent medical issues and history including information on asthma, diabetes, epilepsy, neurological problems, bleeding or blood disorders, recent illness or injury, cardiac conditions, bowel problems, skin problems, limb or joint problems or injuries, pregnancy, or any other medical problems (attach additional page if necessary):

I hereby authorize and give permission, that myself / the participant may be given emergency treatment including first aid and CPR by qualified Skate Like a Girl staff and volunteers. I also give permission for myself/my child to be transported by ambulance and to be treated by any physician, hospital, health care provider, or other medical personnel selected by the staff of Skate Like a Girl to provide prompt medical services. I agree that once the participant is in the care of medical personnel or a medical facility, Skate Like a Girl shall have no further responsibility for the participant and I agree to pay all costs associate with such medical care and transportation.

In the event that I cannot be contacted, I further authorize consent to the medical, surgical, and hospital care treatment procedures to be performed for myself/my child by a any physician, hospital, health care provider, or other medical personnel selected by a Skate Like a Girl staff when deemed necessary or advisable by the medical personnel to safeguard the participant's health. I wave my right of informed consent to such treatment.

The health history on this page is correct and not falsified to the best of our knowledge.

\_\_\_\_\_  
Participant or Parent / Legal Guardian Signature (must be over 18 to sign)

\_\_\_\_\_  
date

**In consideration of being allowed to participate in any way in the Skate Like a Girl clinic, program, related events, and activities the undersigned acknowledges, appreciates, and agrees that:**

1. The risk of injury from the activities involved in these programs is significant, including potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me 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. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official immediately, and
4. For myself and on behalf of my/our heirs, assigns, personal representatives and next of kin HEREBY RELEASE Skate Like a Girl its officers, officials, agents, and/or employees, other participants, sanctioned events, sanctioned organizations, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors of premises used to conduct the event (Releasees), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all of the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent of the 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 VOLUNTARILY WITHOUT INDUCEMENT. I ATTEST THAT I AM PHYSICALLY FIT AND HAVE BEEN TRAINED FOR THIS ACTIVITY.

**I WANT TO PARTICIPATE IN THIS HAZARDOUS SPORT!**

I, the undersigned participant / parent / legal guardian of the youth participant (under 18), give permission for myself/the participant to engage in the **Skate Like a Girl program**.

Program activities and dates are as follows:

<u>Date:</u>	<u>Activity:</u>	<u>Time:</u>	<u>Location:</u>
	<b>Skateboard Clinic</b>		

I assume all risks, and hazards incidental to participating in the activity and do hereby waive, release, absolve, indemnify, and agree to hold harmless Skate Like a Girl, their supervisor, participants and instructors for any claim arising out of any injury to myself or the participant.

- I grant full permission to use any photographs, videotapes, motion pictures, recordings, or any other record of this program for promotion of Skate Like a Girl.

I certify (or declare) that I am the parent or legal guardian of the above-named young person and that I have authority to authorize such activities and actions.

\_\_\_\_\_  
**Participant or Parent / Legal Guardian Signature** (must be over 18 to sign)

\_\_\_\_\_  
*date*