



ID No. \_\_\_\_\_

### City of Sarasota - Skate Park

#### PARENTAL CONSENT for MINOR to PARTICIPATE in Skateboarding or Inline Skating Form

(UNDER 18 YRS.)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Medical Alert: \_\_\_\_\_

#### Parental/Guardian Consent

**I, the undersigned \_\_\_\_\_, the undersigned parent/guardian of \_\_\_\_\_, a minor, hereby give my consent for this minor to participate in skateboarding or inline skating at the City of Sarasota's Skate Park. I, the undersigned skater, acknowledge, agree, and understand that:**

1. The undersigned and minor recognizes the risks and dangers inherent in these activities and that these risks and dangers, both known and unknown, even if arising from the negligence of the City (including its officers, agents or employees), are being assumed by the undersigned and minor.
2. The undersigned understands that by signing this Waiver Form, he/she is releasing the City of Sarasota (including its officers, agents or employees), from any and all liability, including its own negligence, for any personal injury, death or damage that arises out of the undersigned participation in such activity.
3. The undersigned and minor agrees to follow all established rules & regulations of the City of Sarasota and the Sarasota Skate Park. Violations of such may result in suspension and/or termination of Skate Park privileges without refund of user fee.
4. This Consent Form will remain in effect until, is suspended/terminated by the City of Sarasota, or revoked in writing by the undersigned, whichever comes first.
5. The City of Sarasota reserves the right to refuse or limit admittance at any time without refund of user fee.

**We the undersigned parent/guardian and skater, acknowledge that we understand all the above provisions in this Consent Form.**

\_\_\_\_\_  
Minor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

#### DOCUMENT MUST BE NOTARIZED

STATE OF FLORIDA, COUNTY OF SARASOTA

The foregoing was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 200 \_\_\_\_, by \_\_\_\_\_, who is personally known to me or \_\_\_\_\_ who has produced

\_\_\_\_\_ as identification.

(Government issued photo ID only)

seal

\_\_\_\_\_  
NOTARY PUBLIC