



ID No. _____

City of Sarasota - Skate Park

REGISTRATION & WAIVER FORM

(18 YRS. and OVER)

Last Name: _____ First Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ Email: _____

Emergency Contact: _____ Phone: () _____

Medical Alert: _____

Waiver and Release of Liability

I, the undersigned _____ being 18 years or older, hereby acknowledge and understand that:

1. The undersigned 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.
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 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 is revoked in writing by the undersigned, without refund of user fee.
5. The City of Sarasota reserves the right to refuse admittance at any time.

I acknowledge that I have read and that I understand all the above provisions in this Consent Form.

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.
(Gov't issued photo ID only)

seal

NOTARY PUBLIC