



Kicks & Tricks Skateboard Competition

Youth Registration Form & Waiver and Release of Liability

2017



Participant Information

Contestant Name: _____ Age: _____ Gender: _____
 Parent Name: _____ Phone Number: _____
 Home Address: _____ City: _____ Zip Code: _____
 E-mail Address: _____

In Case of Emergency

1. Name: _____ Phone: _____ Relationship: _____
 1. Name: _____ Phone: _____ Relationship: _____

Family Physician

Name: _____ Phone: _____ Address: _____

Medical History

Known Allergies (Bee Sting, Medications, Specific Foods):

Medical Conditions: Asthma _____ Diabetes _____ Epilepsy _____ Other _____

Registration Information

Contestant will be participating in the following:

Age Division:

- 1) 12 and under _____ 2) 13-17 _____

Flow Section (skate around the entire park for 45 seconds, 4 contestants at a time, each group will have two 45 sec rounds) _____

Best Trick (anywhere inside the park, 4 skaters skate for 2 minutes trying their best tricks) _____

Game of S.K.A.T.E. (played by group of skaters like HORSE in basket ball) _____

Waiver & Release of Liability

Please Read Carefully (THE CITY DOES NOT CARRY MEDICAL INSURANCE FOR ANY PROGRAM/CLASS/ACTIVITY).

In consideration for permitting my child to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have or which may accrue as a result of my child's participation in said activity. This release is intended to discharge in advance the above City (its officers, employees, volunteers and agents) from and against any and all liability arising out of or connected in any way with my child's participation in said activity, even though that liability may arise out of negligence or carelessness on the part of said City (its officers, employees, volunteers and agents).

I understand that the above activity may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; that serious accidents occasionally occur during the above activity; and that participants in the above activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless, I have voluntarily applied to let my child participate in said activity and I hereby agree to assume any and all risks of injury or death and to release and hold harmless the above City (its officers, employees, volunteers, and agents) who through negligence, carelessness or any other act or omission might otherwise be liable to me. I further understand and agree that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

I further agree to indemnify and to hold the above City (its officer, employees, volunteers and agents) free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage that my child may sustain while participating in said activity.

By registering for the 2017 Kicks & Tricks Skateboard Competition, I acknowledge that my child's photo may be taken and potentially used in promotion for Eureka Parks & Recreation.

Parent Name (Print): _____

Parent Name (Signature): _____

Date: _____

Please note that Eureka Parks & Recreation staff are not responsible for the arrival and departure of your child to and from this event. The parent is responsible for whereabouts of their child.

