

PARTICIPANTS ACTIVITY WAIVER

NAME _____

DATE OF BIRTH _____

ADDRESS _____

CITY _____

PHONE _____

WAIVER OF PHYSICAL DAMAGE OR INJURY

ROLLER SKATING AT GEORGE GIPP ICE ARENA

IN CONSIDERATION OF ACCEPTING THIS ACTIVITY, THE PERSON INTENDED TO BE LEGALLY BOUND FOR THEMSELVES AND THEIR HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVE AND RELEASE ANY AND ALL RIGHTS FOR INJURIES AND DAMAGES THEY MAY HAVE AGAINST THE VILLAGE OF LAURIUM, ITS OFFICIALS, AND THE VILLAGE OF LAURIUM REPRESENTATIVES, SUCCESSORS, AND ASSIGNS FOR ANY AND ALL INJURIES OR DAMAGES SUFFERED IN THE CONNECTION WITH THE ACTIVITY OF ROLLER SKATING AT THE GEORGE GIPP ICE ARENA

THE PARTICIPANT ATTEST AND VERIFIES THAT THEY ARE PHYSICALLY FIT AND CAPABLE OF SAID ACTIVITY AND THEY UNDERSTAND THAT THIS ACTIVITY IS VOLUNTARY AND COULD BE HAZARDOUS.

PARTICIPANT SIGNATURE

PARENT OR LEGAL GUARDIAN SIGNATURE- FOR UNDER AGE PARTICIPANT