

Parent or Guardian

VILLAGE OF ARDSLEY

DEPARTMENT OF PARKS AND RECREATION 18 CENTER STREET ARDSLEY NY 10502 Please print clearly & Sign form

ARDSLEY VILLAGE SKATEPARK - HOLD HARMLESS RELEASE: PARENTAL PERMISSION

SK	ATER/SKATEBOARDER/BIKER NAME:
DA	TE OF BIRTH: AGE: SCHOOL: GRADE:
	DRESS: PHONE #:
	ase include: house # / street name / village, town or city /state / zipcode) ERGENCY CONTACT: PHONE #:
eacl	re pleased that your child has decided to participate in the Skatepark Programs. It is required by the Village of Ardsley th skater/biker's parent or legal guardian complete the Hold Harmless Release. The mandatory understanding concerning cipation is listed in three parts as follows: 1.
	ou give your child, identified in the top of this form, permission to participate at Ardsley Village Skatepark listed above.
Vill natu	ou, on behalf of yourself, your child, your assigns, executors, and heirs, agree to release, indemnify, and hold harmless the ge of Ardsley, and its officials, officers, agents and employees from any and all liability, damage, injuries and/or claim of an rearising out of or in any way related to your child's participation at this skate park including those things caused by the sol gence of the Village of Ardsley.
to: ł	ou state that you are aware of all the inherent dangers and risks involved in skate park participation including but not limite odily injury, sprains, fractures, dislocations, lacerations, concussions, skin disease, eye, head, neck or back injuries, paralysi ath. Some specific risks include, but are not limited to:
	 Being hit or struck by sports equipment (skateboard, skates, bike) Being hit, struck, physically challenged or colliding with other skate park participants Collision with skate park facilities (structures, ground, rink, obstacles, fence, fence posts)
	You understand that the Village of Ardsley does not provide any Accident or Medical Insurance and you are required to the this for your child. You agree that you are financially responsible for all medical expenses whatsoever.
free Par In the class guarantes insu Par 1. Here	ou understand that the terms of this agreement are legally binding and certify that you are signing this agreement of your ow will after carefully reading it. 2. Medical Authorization e event of serious illness or injury, I authorize the facility staff and/or the Village of Ardsley Police Department to transport eemed necessary) my child to a hospital emergency facility for treatment. All reasonable attempts to contact a parent of dian will be made. I accept responsibility for all costs involved in the transport and treatment of my child. My hospital ance carrier is: 3. Facility Rules and Regulations iking may be permitted in separate sessions only. Absolutely no biking will be permitted during tateboarding/in-line skating sessions.
2. <i>A</i>	ll skaters/bikers must have a signed waiver on file. Skaters under 9 years of age must be accompanied by parent or guardian.
	ll skaters/bikers must wear protective gear and equipment, which includes helmet, knee and elbow pads, and proper shoes. Wrist guards or protective gloves are strongly recommended.
٤	Il protective gear and equipment must be designed for skateboarding/in-line skating/biking and be in pool condition. Village of Ardsley reserves the right to refuse to allow anyone to skate/bike if their . rotective gear and equipment are not adequate
5. A	ll skaters/bikers agree to act in an orderly, safe and considerate manner while on the premises.
	o "snaking." Everyone is to wait his or her turn. Reckless or dangerous skaters/bikers will be requested leave the skate park immediately.
I	Il injuries, whether major or minor in nature, are to be reported to the management immediately. It the case of a serious injury, no skater/biker shall move the injured person and I skateboarding/in-line skating/biking shall cease immediately. Signature required
In v	ritness whereof, this instrument is duly executed:
T 7	Date X

Witness