

Phat Factory Sk8 Park

Phone: 537-8080

E-mail: udyc@execulink.com

www.phatfactorysk8park.20m.com

Last Name

DO NOT WRITE OVER THIS LINE

First Name

Birthday

PARTICIPANT REGISTRATION FORM 2006

All Participants Must Complete and sign the waiver and release of liability, assumptions of all risks and consent to use likeness before entering the facility

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ CITY: _____

PROVINCE: _____ POSTAL CODE: _____ HOME PHONE : _____

BIRTHDATE (mm/dd/yy): ____/____/____ AGE: _____ GRADE: _____

E-MAIL: _____ SCHOOL: _____

Emergency Contact Information

NAME: _____ PHONE #: _____

RELATION TO YOU: _____ WORK OR CELL # _____

HEALTH CARD #: _____

DOCTORS NAME: _____ DOCTORS PHONE #: _____

MEDICAL CONDITIONS (asthma, hemophilia, etc.): _____

Please answer these questions:

How did you hear about the Phat Factory Sk8 Park?

- | | | |
|--|---|-----------------------------------|
| <input type="checkbox"/> School | <input type="checkbox"/> Magazine/Advertisement | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Poster | <input type="checkbox"/> Newspaper | <input type="checkbox"/> TV/Radio |
| <input type="checkbox"/> Upper Deck Youth Centre | <input type="checkbox"/> Other _____ | |

Please Choose one:

- | | | | | |
|-------------------------------------|---------------------------------|----------------------------------|------------------------------|--|
| <input type="checkbox"/> Skateboard | <input type="checkbox"/> Inline | <input type="checkbox"/> Scooter | <input type="checkbox"/> BMX | <input type="checkbox"/> Mountain Bike |
|-------------------------------------|---------------------------------|----------------------------------|------------------------------|--|

Would you like to see a permanent Youth Park in the City of Woodstock?

- | | | | | | |
|------------------------------|-----------------------------|---|----|----------------------------------|-------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | If Yes... <input type="checkbox"/> Indoor | OR | <input type="checkbox"/> Outdoor | <input type="checkbox"/> Both |
|------------------------------|-----------------------------|---|----|----------------------------------|-------------------------------|

SEE REVERSE

Processed by: _____ Date: ____/____/____

Employee Signature

Month/Day/Year

- | | | |
|---|---|---|
| <input type="checkbox"/> Logged in Computer | <input type="checkbox"/> Membership Fee Paid (\$30) | <input type="checkbox"/> Membership Card Issued |
|---|---|---|

ALL MEMBERSHIP MONEY PAID IS NOT REFUNDABLE FOR ANY REASON.

WAIVER AND RELEASE OF LIABILITY, ASSUMPTIONS OF ALL RISKS, AND CONSENT TO USE OF LIKENESS

READ BEFORE SIGNING

By signing below, I agree that:

- 1. I have voluntarily decided to participate in activities and events at, and use the facilities of, Phat Factory Sk8 Park, which is operated by the organization of Southwestern Ontario Youth for Christ.
2. I am voluntarily participating with the knowledge of the numerous risks and dangers involved, including but not limited to: physical exertion for which I may not be prepared; my consumption of alcoholic beverages; breakdown of equipment, whether rented or owned; accident or illness; the risk of negligence by myself or others, including Phat Factory Sk8 Park properties, and/or Southwestern Ontario Youth for Christ; and the potential for serious injury, including permanent paralysis or death.
3. I authorize the administration of any first aid treatment necessary, and in the case of medical emergency, give permission to the Physician selected by the supervisors to hospitalize and secure proper treatment for the participant named above.
4. I will follow all written and verbal rules of safety presented to me by Phat Factory Sk8 Park and its employees
5. The enjoyment and excitement of skating and biking is derived in part from the inherent risks associated with an activity that is beyond the generally accepted margins of safety, and that these inherent risk contribute to such enjoyment and excitement, and are significant reasons for my participation.
6. I am responsible for my own welfare and accept any and all risks of unanticipated or anticipated events, illness, injury, emotional or physical trauma or death.
7. One of the conditions to entering Phat Factory Sk8 Park and using its facilities is my execution of this Waiver; therefore, as lawful consideration for being permitted to enter Phat Factory Sk8 Park and use its facilities, I hereby RELEASE AND DISCHARGE FOREVER PHAT FACTORY Sk8 Park ,IT'S DIRECTORS, CORPORATION MEMBERS, OFFICERS, AGENTS, EMPLOYEES, VOLUNTEERS, SPONSORING AGENTS, SPONSORS, ADVERTISERS, AND THE OWNERS AND LESSORS OF PREMISES USED TO CONDUCT A PHAT FACTORY SK8 PARK EVENT ("RELEASEES"), FROM AND AGAINST ANY AND ALL LIABILITY ARISING FROM MY USE OF PHAT FACTORY SK8 PARK OR PARTICIPATION IN ACTIVITIES OR EVENTS AT PHAT FACTORY SKATEPARK.
8. The release shall be legally binding upon me personally, all members of my family and all minors accompanying me, my heirs, successors, assigns and legal representatives, it being my intention to fully assume all of the risks associated with my use of Phat Factory Sk8 Park facilities and to release RELEASEES from any and all liabilities associated with my use of Phat Factory Sk8 Park facilities to the maximum extent permitted by law.
9. I understand that Phat Factory Sk8 Park reserves the right to refuse admittance to any person who refuses to sign this waiver or who it judges to be incapable of meeting the rigors and requirements of participation in the activities.
10. Southwestern Ontario Youth for Christ, its agents, successors and/or assigns, reserve the right to take photographic, film, audio or digital records of me using Phat Factory Sk8 Park facilities or participating in events or activities sponsored by Southwestern Ontario Youth for Christ, and I further agree that Southwestern Ontario Youth for Christ may use any such Southwestern Ontario Youth for Christ media for promotion and/or commercial purposes, as well as approve such use by third parties with whom Southwestern Ontario Youth for Christ media may engage in joint marketing, without any remuneration to me. I hereby assign Southwestern Ontario Youth for Christ all right, title and interest I may have in or to Southwestern Ontario Youth for Christ media and grant Southwestern Ontario Youth for Christ a royalty-free, exclusive, perpetual and irrevocable license to the Southwestern Ontario Youth for Christ media.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE WAIVER AND OTHER PROVISIONS SET OUT ABOVE.

Participant's Signature: _____ Print Name: _____
Date Signed (mm/dd/yy): ____/____/____

Declaration of "Advanced" status: I understand that a HELMET with a chin strap MUST BE WORN AT ALL TIMES. I also Understand that my voluntarily choosing NOT to wear recommended safety equipment (elbow pads, knee pads, mouth guard, etc.) could lead to serious injury. Any injury resulting from my refusal to wear recommended safety equipment is 100% my own responsibility, and holds harmless to Southwestern Ontario Youth For Christ and all related agencies. X (Participants Signature required)

FOR PARTICIPANTS OF MINORITY AGE (Under 18 at time of signing)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided herein, for myself, my heirs, assigns, and next of kin and any other parent and/or guardian who has placed custody of the above-named minor participant in my care. I further release and agree to indemnify and hold harmless the RELEASEES from any and all liabilities incident to the minor participant's use of the Phat Factory Sk8 Park facilities and/or participation in events or activities at Phat Factory Sk8 Park facilities, to the fullest extent permitted by law.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE WAIVER AND OTHER PROVISIONS SET OUT ABOVE.

I testify by signing below that I am the Parent and/or Legal Guardian for the above named person

Parent/Guardian Signature: _____ Date Signed: (dd/mm/yy) ____/____/____
Print First Name : _____ Print Last Name: _____
Home Address: _____ City: _____
Province: _____ Postal Code: _____ Home Phone: _____