

CROWDER POWER BLADE CONTEST WAIVER AND RELEASE OF LIABILITY

Event: Crowder Power Blade Contest

Date: _____

Location: Marsh Creek Skatepark

Participant Name: _____

Address: _____

Phone Number: _____

Email Address: _____

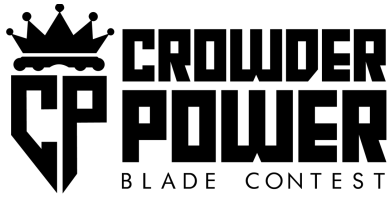
WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the Crowder Power Blade Contest, related events, and activities, I, [Participant Name], the undersigned, acknowledge, appreciate, and agree that:

Risk of Injury: I understand the nature of skating activities and acknowledge my experience and capabilities in engaging in such activities. I understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis, and death, which may be caused by my own actions or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below.

Release of Liability: I hereby release, discharge, and covenant not to sue the City of Raleigh, Crowder Power, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations.

Acceptance of Responsibility: I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.



Medical Treatment: I hereby consent to receive medical treatment deemed necessary if I am injured or require medical attention during my participation in the event. I understand and agree that I am solely responsible for all costs related to such medical treatment, medical transportation, and/or evacuation.

Acknowledgment of Understanding: I have read this waiver and release of liability and fully understand its terms. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant: _____

Date: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

Signature of Parent/Guardian: _____

Date: _____