

**28th & B Street Skate and Urban Art Park
18 Years & Older Registration Form**

18 YEARS & OLDER PARTICIPANT INFORMATION			
First & Last Name:		School:	
Residential Address:		City:	
Participant Phone:		Text: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Participant Email Address:			
ETHNICITY – Select all that apply			
<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic or Latinx
<input type="checkbox"/> Middle Eastern or North African	<input type="checkbox"/> Native American	<input type="checkbox"/> Pacific Islander or Filipino	<input type="checkbox"/> Self-description:
DROP-IN ACTIVITY	GENDER	AGE	DATE of BIRTH
28 th & B Street Skate and Urban Art Park			
HOW DID YOU HEAR ABOUTH THE PROGRAM? – Select all that apply			
<input type="checkbox"/> Website (City of Sacramento YPCE)		<input type="checkbox"/> Social Media (Facebook, Instagram, etc.)	
<input type="checkbox"/> Flyer from the Community Center or School		<input type="checkbox"/> Word of Mouth	
<input type="checkbox"/> YPCE Come Out & Play Edition		<input type="checkbox"/> Other:	
HOLD HARMLESS AGREEMENT FOR PARTICIPATION IN CITY OF SACRAMENTO PROGRAMS			
<p>Hold Harmless Agreement: I understand that SKATEBOARDING, SCOOTERING, and/or ROLLER SKATING (collectively "Skating" or "Skate") is inherently dangerous and that serious accidents and injuries can occur. I agree to wear a protective helmet and elbow and knee pads while Skating at the City's 28th & B Street Skate and Urban Art Park ("Skate Park"), unless I have initialed below that I am an experienced skater and chose not to wear a protective helmet and elbow and knee pads. Skating also is a group activity that cannot be performed by staying 6 ft. away from other participants, so I may be exposed to a person who has the COVID-19 respiratory illness at the Skate Park. Therefore, it is recommended that Skaters wear a face mask, but the City is not responsible if Skaters do not wear face masks and I become ill with COVID-19.</p> <p>Knowing the risks and in consideration permitting me to Skate at the Skate Park, I agree to assume all risks of injury that may occur to myself and I hereby voluntarily release, discharge, waive, relinquish, and hold harmless (collectively "Release") any and all claims or actions that I may have now or in the future against the City of Sacramento and its officers, employees, agents and volunteers ("Releasees") for damages for personal injury including death, and personal property damage (the "Risks") that I may suffer resulting from my presence and Skating at the Skate Park, including, but not limited to, Risks caused by my actions or inactions, the acts of any other person at the Skate Park, any person providing Skating advice or instruction, and any person who has COVID-19, even though the Risks may arise out of negligence, carelessness, or the improper actions or failure to act on the part of the Releasees, but excluding intentional misconduct. This Release includes any damage to or loss of my personal property while under the care and custody of Releasees, even though the damage or loss may arise out of their negligence or carelessness.</p> <p>I also assume full responsibility for my behavior. I agree to be liable for the costs of any injury or damage I cause and I agree to pay for all damages to persons or property caused by my willful or unintentional acts while Skating at the Skate Park. I have read and agree to comply with the Rules of the Skate Park. I understand that if I violate the Rules or otherwise interfere with the operation of the Skate Park, I will be required to leave without any refund. I understand that if my behavior interferes with the Skate Park operation, I may be expelled from the Skate Park and City staff will contact law enforcement to arrest me for trespass if I refuse to leave.</p> <p>I further understand and agree that this Release and assumption of Risks is binding on my heirs, executors, administrators, and assigns. I have read this Release and I understand that I am giving up substantial rights by signing it. I have had the opportunity to obtain legal advice prior to signing it, and I sign it voluntarily. This Release shall remain in effect indefinitely until it is revoked in writing by submitting written notice to the City of Sacramento, Director of Youth, Parks & Community Enrichment, 915 I Street, 3rd floor, Sacramento, CA 95814, and I thereafter will cease from entering the Skate Park or using any City skateboarding facility.</p>			

Consent to Photograph, Film or Tape: I agree to the City taking photographs, films, videotapes, or tape recording of me while participating in the City's Skating program. I permit these photographs, films, and tapes to be publicly released by the City for use in print or video publications, web sites, and billboards for promotional purposes. If I do not consent to the promotional use of my photograph and recording I must inform City staff of my non-consent in writing.

Permission for Medical Treatment: In case of an accident or injury, I authorize City staff to call the 911 emergency number. I give my consent to any medical treatment felt necessary by an attending paramedic, nurse and physician for my physical well-being. I further understand that the responding medical emergency personnel will provide emergency treatment as they deem necessary for my safety and protection. I agree to be responsible for their medical expenses.

NO HELMET AND/OR NO PAD PROTECTION WAIVER: *(please initial if applicable)*

I acknowledge that state law provides that: "No operator of a skateboard park shall permit any person to ride a skateboard therein, unless that person is wearing a helmet, elbow pads, and knee pads." I understand that this law is intended to protect me from injury. Nonetheless, I have asked the City of Sacramento to permit me to Skate without a helmet and/or without elbow or knee pads because I am an adult and an experienced skater. I hereby agree to indemnify and hold harmless the City and its officers, employees, agents, and volunteers from liability from any claims based on their failure to force me to comply with this state law.

18 YEARS & OLDER EMERGENCY CONTACT & SIGNATURE

In Case of an Emergency Contact:

Emergency Contact Phone *(must be different than participant):*

Signature of Participant:

Date: