



Come see how we roll!

Assumption of Risk | Waiver of Liability | Medical Authorization | Photo Release

PLEASE PRINT LEGIBILY

PARTICIPANT NAME _____ o Female o Male BIRTHDATE _____
PARTICIPANT NAME _____ o Female o Male BIRTHDATE _____
PARTICIPANT NAME _____ o Female o Male BIRTHDATE _____
PARTICIPANT NAME _____ o Female o Male BIRTHDATE _____
PARTICIPANT NAME _____ o Female o Male BIRTHDATE _____
PARENT _____ CELL PHONE _____
ADDRESS _____ CITY/ST/ZIP _____

Rink Ratz Inc. MINOR Participant Waiver

(1) I RECOGNIZE THAT SEVERE INJURIES, INCLUDING PERMANENT PARALYSIS OR DEATH CAN OCCUR IN SPORTS OR ACTIVITIES INVOLVING ROLLERSKATING OR MOTION. THOSE ACTIVITIES INCLUDE BUT ARE NOT LIMITED TO ROLLERSKATING, ROLLERBLADING, DANCING, GAMES ON SKATES, AND OTHER ROLLERSKATING ACTIVITIES. BEING FULLY AWARE OF THESE DANGERS, I HEREBY GIVE BY CONSENT FOR MY CHILD(REN) TO PARTICIPATE IN ANY AND ALL OF THE ACTIVITIES HERE AT RINK RATZ INC.

(2) I, BEING THE LEGAL AND ACTING GUARDIAN OF PARTICIPANT, ACTING ON BEHALF OF THE PARTICIPANT, RELEASE AND HOLD HARMLESS RINK RATZ INC, ITS OWNER, OFFICERS, EMPLOYEES AND VOLUNTEERS OF AND FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, AND CAUSES OF ACTION WHATSOEVER, ARISING OUT OF OR RELATED TO ANY LOSS, DAMAGE, OR INJURY, INCLUDING DEATH, THAT MAY BE SUSTAINED BY THE PARTICIPANT, WHILE IN OR UPON THE PREMISES UPON WHICH RINK RATZ IS CONDUCTED, OR ANY PREMISES UNDER THE CONTROL AND SUPERVISION OF RINK RATZ, ITS OWNER, OFFICERS, EMPLOYEES, OR VOLUNTEERS OR IN ROUTE TO OR FROM ANY OF SAID PREMISES, OR WHILE AT ANY PREMISES OR PLACE WHEN ACTIVITIES SPONSORED BY OR PARTICIPATED IN BY RINK RATZ, ITS OWNER, OFFICERS, EMPLOYEES OR VOLUNTEERS.

(3) THE UNDERSIGNED GIVES PERMISSION FOR RINK RATZ INC OWNERS, OFFICERS, EMPLOYEES AND/OR VOLUNTEERS TO SEEK EMERGENCY MEDICAL TREATMENT FOR THE PARTICIPANT(S) IN THE EVENT THEY ARE UNABLE TO REACH ANY PARENT OR GUARDIAN. THE UNDERSIGNED ALSO AGREES THAT THEY THEMSELVES WILL BE RESPONSIBLE FOR ANY FINANCIAL DEBT INCURRED BY SAID ACTION.

(4) OCCASIONALLY, PHOTO/VIDEOS ARE TAKEN AND IN CONSIDERATION FOR MY CHILD(REN)'S PARTICIPATION I HEREBY GRAND MY PERMISSION FOR MY CHILDS LIKENESS TO BE USED IN RINK RATZ INC PUBLICITY OR ADVERTISING. THSES IMAGES WILL BE USED FOR RINK RATZ INC PURPOSES ONLY, AND WILL NOT BE GIVEN OR SOLD TO OUTSIDE COMPANIES OR INDIVIDUALS.

AS LEGAL PARENT OR GUARDIAN OF THIS PARTICIPANT, I HAVE READ AND UNDERSTAND AND ACCEPT EACH OF THE ABOVE CONDITIONS FOR PERMITTING MY CHILD TO PARTICIPATE IN ACTIVITIES AT RINK RATZ INC AND I VOLUNTARILY AFFIX MY NAME IN AGREEMENT.

PARENT/GUARDIAN Printed Name _____ DATE _____
PARENT/GUARDIAN SIGNATURE _____ DATE _____

RINK RATZ INC. | 513 SW KEYSTONE DR. | BLUE SPRINGS, MO 64014 | 816.229.7793
| 810 FAIRGROUND AVE. | HIGGINSVILLE, MO 64037 | 660.584.2454
www.rinkratzsk8.com



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Rink Ratz Inc. ADULT Participant Waiver

IN CONSIDERATION OF PARTICIPATING IN RINK RATZ INC ACTIVITIES, I REPRESENT THAT I UNDERSTAND THE NATURE OF THE ACTIVITIES INVOLVED AND THAT I AM QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITIES.

I FULLY UNDERSTAND THAT THIS ACTIVITY INVOLVES 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; AND THAT THERE MAY BE OTHER RISKS EITHER NOT KNOWN TO ME OR NOT READILY FORESEEABLE AT THIS TIME; AND I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COST, AND DAMAGES I INCUR AS A RESULT OF MY PARTICIPATION IN THE ACTIVITY.

I HEARBY RELEASE, DISCHARGE, AND CONVENANT NOT TO SUE RINK RATZ INC, ITS OWNER, OFFICERS, EMPLOYEES, VOLUNTEERS, AND OTHER PARTICIPANTS FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES, ON MY ACCOUNT CAUSED OR ALLEDGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FUTURE AGREE THAT IF, DESPITE THIS RELEASE, WAIVER OF LIABILITY, AND ASSUMPTION OF RISK I, OR ANYONE ON MY BEHALF, MAKE A CLAIM AGAINST ANY OF THE RELEASEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LOSS, LIABILITY, DAMAGE, OR COST, WHICH ANY MAY INCUR AS THE RESULT OF SUCH CLAIM.

OCCASIONALLY, PHOTO/VIDEOS ARE TAKEN FOR PUBLICITY AND ADVERTISING. I HEARBY GRAND MY PERMISSION FOR MY LIKENESS TO BE USED IN RINK RATZ PUBLICITY OR ADVERTISING. THESE IMAGES WILL BE USED FOR RINK RATZ PURPOSES ONLY, AND WILL NOT BE GIVEN OR SOLD TO OUTSIDE COMPANIES OR INDIVIDUALS.

I HAVE READ THE RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Signature of ADULT Participant Printed Name of ADULT Participant Date
Signature of ADULT Participant Printed Name of ADULT Participant Date

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