

# *Pit Stop Youth Ministry Skate Park*

700 S. Houcks Rd.  
Harrisburg, PA 17109  
717-545-3261

## **Waiver and Release of Claims with Authorization for Medical Care**

**Please read this form carefully and be aware that in signing up for and participating in these programs and/or activities you will be waiving and releasing all claims arising out of these programs and/or activities. A waiver must be signed by all participants or his/her parent or legal guardian, if they under 18. In consideration of Colonial Park Community Baptist Church's sponsoring skateboarding activities and programs at Pit Stop Youth Ministry Skate Park and accepting you, or your child as a participant in the program, you agree as follows:**

### **Acknowledgement/Assumption of Risk of Injury**

I have fully informed myself of all the details about Colonial Park Community Baptist Church's skateboarding activities and programs, including but not limited to open skating, skateboarding, practice sessions, instructional sessions, and competitions sponsored at Pit Stop Youth Ministry Skate Park and have received satisfactory answers to all questions I have concerning the activities and programs and the risks inherent in the activity. I acknowledge that there are certain risks of injury, damage or loss associated with participation in or observation of these programs and activities because of the equipment involved and type of natural and manmade surfaces on which these programs and activities are engaged. I further understand that Colonial Park Community Baptist Church does not carry medical insurance for injuries sustained from observation of or participation in these programs and activities. I agree to assume the full risk of any injury, loss or damages regardless of severity, which I may sustain as a result of observing or participating in Colonial Park Community Baptist Church's activities or programs held at Pit Stop Youth Ministry Skate Park.

I acknowledge that there are various degrees of skill and experience required for the different activities and I will therefore abide by the rules for use of the various park activities, including wearing all protective gear and equipment that is required for participants and I will follow the instructions of all Staff Members and volunteers. Failure to follow rules and instructions from Staff Members and volunteers may result in termination of my participation in the activities and program.

### **Waiver and Release of Claims for Injury/Permission to Treat**

I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against Colonial Park Community Baptist Church and its subsidiaries, affiliates, partners, officers, directors, agents, servants, sponsors, employees and volunteers, as well as their heirs, assigns and legal representatives, arising out of, connected with, or in any way related to, the activities and programs or my observation of or participation therein. In the event of an emergency, I authorize Colonial Park Community Baptist Church to secure from any licensed hospital, physician and/or medical personnel and treatment deemed necessary for my immediate care and I agree that I will be responsible for payment of any and all medical services required.

### **Indemnity and Defense**

I further agree to indemnify and hold harmless and defend Colonial Park Community Baptist Church and its officers, agents, servants, employees and volunteers from any and all claims of every kind, known and unknown, present and future, that I may have arising out of, connected with, or in any way related to the program or my participation therein.

## Authorization for Use of Image

\_\_\_\_\_ I permit \_\_\_\_\_ I do not permit Colonial Park Community Baptist Church to use any photographs, videotapes, motion picture, recordings or any other records taken while I am on the premises of Pit Stop Youth Ministry Skate Park while engaged in any activity or event sponsored, promoted, or organized by Pit Stop Youth Ministry Skate Park for publicity, advertising or any legitimate purpose.

**My signature on this form indicates that I have read and understand the above Waiver and execute it of my own free will and without any reservation.**

Name of Participant \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature (if 18 or older) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

**Emergency Contact** (required)

Full Name \_\_\_\_\_ Phone \_\_\_\_\_

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

This is to certify that I, as parent/guardian with legal responsibility for this Participant, do give my consent for him/her to participate in all activities and programs associated with Powerhouse Youth Center Skate Park and consent and agree to his/her release as provided above. I release and agree to indemnify Colonial Park Community Baptist Church and its lessor facilities from all liabilities incident to my minor child's involvement or participation in the programs provided above, even if arising from the negligence of Colonial Park Community Baptist Church to the fullest extent permitted by the law.

**Parent/Guardian's Name:** \_\_\_\_\_  
(Please Print)

**Parent/Guardian's Signature:** \_\_\_\_\_

**Emergency Phone #:** ( ) - \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_,

### **Medical Insurance Information (required)**

**In the case of an accident or illness, I also give my permission to obtain emergency medical treatment.**

Insurance carrier: \_\_\_\_\_

Name of policyholder: \_\_\_\_\_

Group/Identification Number: \_\_\_\_\_

Does your Insurance Company require prior authorization for services? Y N (circle one)

If YES, what is the phone number? \_\_\_\_\_

## SAFETY GEAR

EACH PARTICIPANT **MUST (REQUIRED)** WEAR THE FOLLOWING SAFETY GEAR WHILE PARTICIPATING AT THE PIT STOP YOUTH MINISTRY SKATE PARK:

- a. **Helmet:** helps prevent injury to all areas of the head. Must be buckled and fit properly. Helmets must be approved by any well-known organization (like the Pro-Tec models).
- b. **Knee Pads:** used as the first point of dispersion for impact forces during a fall, a skater should first drop to their knees. Pads must be securely strapped around the leg to avoid coming off while sliding.
- c. **Elbow Pads:** gives protection in backward and sideways falls.

ALTHOUGH NOT REQUIRED, WE HIGHLY RECOMMEND THAT YOU ALSO WEAR **WRIST GUARDS:** skaters who lose their balance should try to fall forward. Wrist Guard protection promotes sliding, thereby distributing the impact of the fall.