PARTICIPANT RELEASE OF LIABILITY-READ BEFORE SIGNING

In consideration of the services of RIPPERZ SKATE PARK, LLC their agents, owners, officers, volunteers, participants, employees, landlord, and all other persons or entities acting in any capacity on their behalf, I hereby agree to release, indemnify, and discharge RIPPERZ SKATE PARK, LLC on behalf of myself, my children, my parents, my heirs, assigns, any next of kin, personal representative and estate as follows:

1. I acknowledge that inline skating and/or skateboarding and/or biking entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death or damage to me, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. The risks include among other things: Collision with other participants, the walls, other fixed objects; my own equipment failure or the failure of other's equipment; my own or other's negligence; and objects or conditions on the surface that may cause me to fall; broken bones, sprains, head and back injuries, abrasions, and bruises. Furthermore, RIPPERZ SKATE PARK, LLC employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give inadequate warnings or instructions, and the equipment being used might malfunction.
2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless RIPPERZ SKATE PARK, LLC from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of RIPPERZ SKATE PARK, LLC from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of RIPPERZ SKATE PARK, LLC equipment or facilities, including any such Claims which allege negligent acts or omissions of RIPPERZ SKATE PARK, LLC.
4. Should RIPPERZ SKATE PARK, LLC or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold harmless for all such fees and costs.
5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating or else I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions that could interfere with my safety in this activity, or else I am willing to assume-and bear the costs of-all risks that my be created, directly or indirectly, by any such condition.
6. In the event that I file a lawsuit against RIPPERZ SKATE PARK, LLC I agree to do so solely in the Parish of Calcasieu, State of Louisiana, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

BY SIGNING THIS DOCUMENT, I ACKNOWLEDGE THAT IF ANYONE IS HURT OR PROPERTY IS DAMAGED DURING MY PARTICIPATION IN THIS ACTIVITY, I MAY BE FOUND BY A COURT OF LAW TO HAVE WAIVED MY RIGHT TO MAINTAIN A LAWSUIT AGAINST RIPPERZ SKATE PARK, LLC ON THE BASIS OF ANY CLAIM FROM WHICH I HAVE RELEASED THEM HEREIN. I ALSO UNDERSTAND THAT I HAVE GIVEN UP SUBSTANIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I attest that I am physically fit and have been trained for this activity. I also waive and release the use of my photograph or likeness for any reason or purpose. I WANT TO PARTICIPATE IN THIS HAZARDOUS SPORT!

X_____ _____ _____
PARTICIPANT SIGNATURE | PRINT NAME | DATE OF BIRTH

_____ _____ _____ _____ _____
ADDRESS | APT# | CITY | STATE | ZIP CODE

_____ _____ _____ _____
HOME # | EMERGENCY # | OTHER # | **E-Mail**

PARENT'S OR GUARDIAN'S ADDITION INDEMNIFICATION (Must be completed for participants under the age of 18)

In consideration of _____ (print minor's name) ("Minor") being permitted by RIPPERZ SKATE PARK, LLC to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless RIPPERZ SKATE PARK, LLC from any and all claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

X_____ _____ _____ _____
PARENT SIGNATURE | PRINT NAME | DATE SIGNED | DRIVERS LICENSE OR ID#

MEDICAL RELEASE: In the event that I cannot be reached in an emergency, I hereby give permission to any licensed physician, surgeon, clinic, or hospital to secure proper treatment, and to order anesthesia, for my child/myself as named above. My child/I am allergic to the following medications: _____**SIGNATURE**_____

DOCTOR to be notified in case of emergency: _____

NOTE: PARENT OR GUARDIAN SIGNATURE MUST BE NOTARIZED IF NOT DONE IN THE PRESENCE OF A RIPPERZ SKATE PARK, LLC, OWNER, OFFICER, OR EMPLOYEE. WITNESS SIGNATURE_____