

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Saaron Scott  
Print Participant First and Last Name

13/14/14  
Date



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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Jaquelin Jackson  
Print Participant First and Last Name

3/14/14  
Date

Lan 3012

ROLLER SKATING  
Liability Release Waiver Form

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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Asia Johnson  
Print Participant First and Last Name

3/21/11  
Date

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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Iyana Johnson  
Print Participant First and Last Name

8/23/14  
Date

Legal Custodian if under 18)



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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tamara Johnson  
Print Participant First and Last Name

3/23/14  
Date

[Signature]  
Legal Guardian if under 18)

CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Devon Jones  
Print Participant First and Last Name

3/73/14  
Date

if under 18)

CHARLOTTESVILLE



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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Evann Jones  
Print Participant First and Last Name

3-23-14  
Date

[Signature]  
if under 18)



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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Kean Jones Jr      3-23-14  
Print Participant First and Last Name      Date

[Signature]  
(if under 18)



ROLLER SKATING  
Liability Release Waiver Form

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Antonio Johnson  
Print Participant First and Last Name

3/30/14  
Date



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Janean Jones  
Print Participant First and Last Name

3/30/14  
Date



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Joe Jones  
Print Participant First and Last Name

3/30/14  
Date



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Jon Jones  
Print Participant First and Last Name

3/30/01  
Date



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JANESSA JONES  
Print Participant First and Last Name

3/30/14  
Date

ROLLER SKATING  
Liability Release Waiver Form

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JACLYN JONES  
Print Participant First and Last Name

3/30/14  
Date



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JON JONES  
Print Participant First and Last Name

3/30/14  
Date

ROLLER SKATING  
Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Margaret Berry Jordan  
Print Participant First and Last Name

3/30/14  
Date



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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Lilian Jones  
Print Participant First and Last Name

3/1/13  
Date

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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Christie Jones  
Print Participant First and Last Name

3/2/14  
Date

## ROLLER SKATING Liability Release Waiver Form

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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tashua Jones  
Print Participant First and Last Name

3-2-14  
Date

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Christine Jones  
Print Participant First and Last Name

3/2/14  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Christie Jones  
Print Participant First and Last Name

3/2/14  
Date

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Joseph Jones  
Print Participant First and Last Name

3-2-14  
Date

[Signature]

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Michelle Jones  
Print Participant First and Last Name

3-2-14  
Date

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Jamarques Jones  
Print Participant First and Last Name

3/2/14  
Date

Legal Guardian if under 18)





## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tanza Jones  
Print Participant First and Last Name

3/2/14  
Date

Legal Guardian if under 18)



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Samantha Jones  
Print Participant First and Last Name

2/28/14  
Date

(if under 18)

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Anija Johnson  
Print Participant First and Last Name

2/23/14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Sarah Johnson  
Print Participant First and Last Name

2/23/18  
Date

(Signature if under 18)

## **ROLLER SKATING Liability Release Waiver Form**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Lamira Jackson  
**Print Participant First and Last Name**

2/23/14  
**Date**



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Lamia Jackson  
Print Participant First and Last Name

2/23/2014  
Date

[Signature]



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

TaKiyah Jones  
Print Participant First and Last Name

2/9/14  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Kennady Bhanson  
Print Participant First and Last Name

2/9/14  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Naphawn Johnson  
**Print Participant First and Last Name**

2/18  
**Date**

Signature if under 18)

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Taniyah Jones  
Print Participant First and Last Name

2/9/14  
Date

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Shaun Sammes  
Print Participant First and Last Name

March 2000  
Date

Shaun Sammes  
Legal Guardian if under 18)

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Kyon Jones  
Print Participant First and Last Name

2/9/14  
Date

[Signature]

## **ROLLER SKATING Liability Release Waiver Form**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Ashley Jackson  
**Print Participant First and Last Name**

2-9-2014  
**Date**

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Taviana Jackson  
Print Participant First and Last Name

2-9-2014  
Date

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Teela James  
Print Participant First and Last Name

Feb 28, 2014  
Date

[Signature]

(if under 18)

## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Brandy Jackson  
Print Participant First and Last Name

3-2-17  
Date

[Signature]  
Legal Guardian if under 18)





## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Anija Johnson  
Print Participant First and Last Name

March 16, 2014  
Date

**ROLLER SKATING**  
**Liability Release Waiver Form**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Natasha J. Jorgensen  
**Print Participant First and Last Name**

03/21/2014  
**Date**



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Maya Snodgrass  
Print Participant First and Last Name

03/21/2014  
Date

Participant if under 18)



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tamara Jenkins 4-11-16  
Print Participant First and Last Name Date

M. Daniel  
Participant (if under 18)



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

D'Kiana Johnson  
Print Participant First and Last Name

4-13-14  
Date

(if under 18)

ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Casimir Johnson  
Print Participant First and Last Name

4-13-14  
Date

ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Derrick Jones  
Print Participant First and Last Name

9/17/14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Nancy Johnson  
Print Participant First and Last Name

4/20/14  
Date

NO. 101  
Participant if under 18)



ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Kalijah Rusk  
Print Participant First and Last Name

4/20/14  
Date

ROLLER SKATING  
Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

COGAN JONES  
Print Participant First and Last Name

May 1, 2014  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Kelsey Jones  
Print Participant First and Last Name

May 7, 2014  
Date

CHARLOTTESVILLE

parks & recreation

# ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Stephanie Jackson  
Print Participant First and Last Name

5-25-14  
Date

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Jennifer Johnson  
Print Participant First and Last Name

6/6/14  
Date

CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Bridget Johnson  
Print Participant First and Last Name

June 6, 2014  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tachia Loya  
Print Participant First and Last Name

6.8.14  
Date

11 02

(Signature if under 18)

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Archie Joyce  
Print Participant First and Last Name

6-8-17  
Date



CHARLOTTESVILLE

parks &  
recreation

# ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Destiny Johnson  
Print Participant First and Last Name

6-19-14  
Date

ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

J. R. Rios / Janyra  
Print Participant First and Last Name

6/10/2013  
Date



ROLLER SKATING  
Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Kathleen Jeffers  
Print Participant First and Last Name

6/22/11  
Date

CHARLOTTESVILLE

parks &  
recreation

# ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Robert C. Tedders  
Print Participant First and Last Name

6/22/14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Guadalupe Monroy Flores  
Print Participant First and Last Name

6/22/14  
Date

CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Bella Jeffers  
Print Participant First and Last Name

July 6 - 14  
Date

CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Tiffany Jeffers  
Print Participant First and Last Name

July 6-14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Courtney Jacob  
Print Participant First and Last Name

7/20/14  
Date

[Signature]



**Liability Release Waiver Form**

**recreation**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

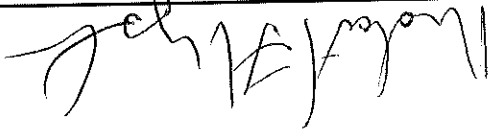
**Print Participant First and Last Name**

Kayla Johnson

**Date**

8/20/2014

**Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)**



CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

William James  
Print Participant First and Last Name

7/20/14  
Date

ROLLER SKATING  
Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Jakya Jones

Print Participant First and Last Name

Date

8-10-14



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Jae'la Jones  
Print Participant First and Last Name

8-10-14  
Date

ROLLER SKATING  
Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Aidan Jordan  
Print Participant First and Last Name

9-7-14  
Date

CHARLOTTESVILLE

parks & recreation

# ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Patrick Jordan  
Print Participant First and Last Name

9/7/2014  
Date



## ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Nikko Jackson Hopper  
Print Participant First and Last Name

9/21/14  
Date

CHARLOTTESVILLE

parks & recreation

# ROLLER SKATING Liability Release Waiver Form

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Linnayah Jones  
Print Participant First and Last Name

10/3/19  
Date



**Roller Skating  
Liability Release Waiver Form**

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

J'ana Jackson  
Print Participant First and Last Name

10/3/14  
Date

Michelle Brown  
Signature of Participant (or Parent, Legal Guardian or Legal Custodian if under 18)  
10/3/14

ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Brandon Johnson  
Print Participant First and Last Name

Date

Oct. 3, 2014

ROLLER SKATING  
Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Janet Johnson  
Print Participant First and Last Name

Oct 24, 2014  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Jamaques Jones  
Print Participant First and Last Name

10/12/2014  
Date

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tanza Jones  
Print Participant First and Last Name

10/12/2014  
Date

**Liability Release Waiver Form**

**Parks & Recreation**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury, damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Zander James  
Print Participant First and Last Name

10-17-14  
Date

[Signature]  
Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)

**Liability Release Waiver Form**

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

<u>Annika James</u> Print Participant First and Last Name	<u>10-17-14</u> Date
<u>[Signature]</u> Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)	



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Leo Jacks  
Print Participant First and Last Name

11/2/14  
Date





## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Marques Sacks  
Print Participant First and Last Name

11/2/14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Maddox Sacks  
Print Participant First and Last Name

11/21/14  
Date

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

JAVISHA JACKSON  
Print Participant First and Last Name

11/9/14  
Date

Thomas Jackson

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Monica Woodson  
Print Participant First and Last Name

Date \_\_\_\_\_

James Crocker



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Jarvis Jackson  
Print Participant First and Last Name

11/9/14  
Date

[Signature]  
Signature of Participant Parent, Legal Guardian or Legal Custodian

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Nikolas Johnson  
Print Participant First and Last Name

11/16/14  
Date

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Doretha M. Johnson

Print Participant First and Last Name

11/16/24

Date

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Lukas Johnson  
Print Participant First and Last Name

11/16/14  
Date



CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Chereese Jackson  
Print Participant First and Last Name

11/23/14  
Date

Adach

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Tiera Johnson  
Print Participant First and Last Name

11/7/14  
Date

CHARLOTTESVILLE

parks &  
recreation

## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Henrik Johnson  
Print Participant First and Last Name

7<sup>th</sup> Dec. 2014  
Date

P. Johnson (guardian)

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

ALEXANDER JEFFERY  
Print Participant First and Last Name

10/19/14  
Date



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

THOMAS JEFFERY  
Print Participant First and Last Name

12/19/2014  
Date

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

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I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Erin Jeffery  
Print Participant First and Last Name

12/19/14  
Date

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

I understand the nature and scope of the activity listed above. I understand that there are risks and dangers associated with the activity. I understand that it is not the function of the City of Charlottesville, its employees, agents, operators, or instructors to guarantee the safety of participants with respect to this activity. I also understand that each participant has the responsibility to exercise due care in the performance of the activity for the safety of himself/herself and the other participants.

In consideration of my/the participant's being permitted to enroll in this activity, I hereby release, indemnify and hold harmless the City of Charlottesville, its employees, agents, operators and instructors from any and all claims, demands, costs, charges, and expenses for harm, injury damage or loss which may be sustained by me/the participant as a result of or relating to participation in this activity.

Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's picture and any materials he or she has produced during the program may be placed on the City's website or within other materials publicizing the City's Recreation Programs. I also give permission for the participant, or his or her picture, to appear in the newspaper or on television as a participant in the Recreation Program.

I have read, and I understand the above Liability Release and Photo Permission.

**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Tyasia Jones  
Print Participant First and Last Name

12/21/14  
Date

CHARLOTTESVILLE

parks &  
recreation

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Reemae Jackson  
Print Participant First and Last Name

1/9/15  
Date

Kenya Matis