

**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):

Khalil Jones

Print Participant First and Last Name

13 Feb 15

Date

[Signature]

Signature of participant (or Parent, Legal Guardian or 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):

Myles Jan
Print Participant First and Last Name

13 FEB 15
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or 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):

Rikiera Johnson
Print Participant First and Last Name

5/30/14
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or 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):

Nalay Johnson

Print Participant First and Last Name

5/30/14
Date

Bryan M.
Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)

CHARLOTTESVILLE



ROLLER SKATING Liability Release Waiver Form

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Kiera Johnson
Print Participant First and Last Name

5/30/14
Date

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



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Cassian Johnson
Print Participant First and Last Name

8/30/14
Date

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



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Bryna Johnson
Print Participant First and Last Name

5/30/14
Date

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



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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):

Tatiana Claire Jorgensen
Print Participant First and Last Name

3/7/14
Date

Signature of participant (or Parent, Legal Guardian or 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):

Sophia Jorgensen
Print Participant First and Last Name

3/7/14
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or 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):

Ashley Johnson
Print Participant First and Last Name

3/9/14
Date

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

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):

Tyson Jones
Print Participant First and Last Name

7-11-15
Date

P. Jones
Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)

ROLLER SKATING
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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):

Clay Johnson

Print Participant First and Last Name

12/5/14

Date

[Signature]

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

CHARLOTTESVILLE

parks & recreation

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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):

Joelle Jordan

Print Participant First and Last Name

1/16/15
Date

Lara Jackson

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

ROLLER SKATING
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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):

Tiara Jackson
Print Participant First and Last Name

1/16/15
Date

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

ROLLER SKATING
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Casimir Johnson
Print Participant First and Last Name

5/30/14
Date

Bryana
Signature of participant (or Parent, Legal Guardian or 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):

Sergio Jackson
Print Participant First and Last Name

12-11-14
Date

Sergio Jackson
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Jamal Jackson

Print Participant First and Last Name

12/14/14

Date

Jamal Jackson

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

CHARLOTTESVILLE

parks &
recreation

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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):

Cameron Jackson
Print Participant First and Last Name

11/21/18
Date

Sally Beiler (site supervisor)
Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)

CHARLOTTESVILLE

parks &
recreation

ROLLER SKATING Liability Release Waiver Form

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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):

Jamayah Johnson

Print Participant First and Last Name

Date

11/21/14

Sally Berlin (site supervisor)

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

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.

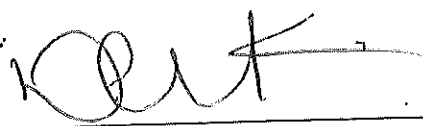
In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Patrick Pabala

9/14/14

Print Participant First and Last Name

Date



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

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):

Elyse Tabalee

9/14/14

Print Participant First and Last Name

Date



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

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):

Emma Tabalee

9/14/14

Print Participant First and Last Name

Date



Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Charles Achman 4th
Print Participant First and Last Name

7-25-14
Date

Charles Achman
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):

CORNELIUS JONES
Print Participant First and Last Name

7/25/14
Date

[Signature]
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):

Melanie Jones
Print Participant First and Last Name

3/1/13
Date

Mel Jones
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):

Miles Jones
Print Participant First and Last Name

3/1/13
Date

M. Jones
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Abi Gomez
Print Participant First and Last Name

3/1/13
Date

[Signature]
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):

Luke Jones
Print Participant First and Last Name

3/11/13
Date

[Signature]
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):

A handwritten signature in cursive script, appearing to read "Shaniya Johnson", written over a horizontal line.

Print Participant First and Last Name

The date "1/17/16" is handwritten in cursive script over a horizontal line.

Date

A handwritten signature in cursive script, appearing to read "Shaniya Johnson", written over a horizontal line.

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):

Khalij Johnson

Print Participant First and Last Name

1-17-16
Date

Shirley Johnson

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):

Angela Johnson
Print Participant First and Last Name

2/21/16
Date

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

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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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):

Alyssa Johnson
Print Participant First and Last Name

2/21/16
Date

Angela Johnson
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Khamari Jackson
Print Participant First and Last Name

2-21-2016
Date

Tara de Cardenas
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Gary Johnson

Print Participant First and Last Name

3/18/16

Date

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):

Aniya Bhargava
Print Participant First and Last Name

3-4-16
Date

Aniya Bhargava
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Liam Jones
Print Participant First and Last Name

11/7/2016
Date

WA Jones
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.

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):

Joseph Jones
Print Participant First and Last Name

11/17/2016
Date

[Signature]
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.

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):

William Jones
Print Participant First and Last Name

1/17/2016
Date

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

**ROLLER SKATING
Liability Release Waiver Form**

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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):

Shonda Jones
Print Participant First and Last Name

1/12/2016
Date

[Signature]
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.

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):

Shiloh Jones

Print Participant First and Last Name

1/17/2016
Date

[Signature]
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):

Samantha Jones
Print Participant First and Last Name

1/17/2016
Date

[Signature]
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):

Kaleigh Jones
Print Participant First and Last Name

1-17-16
Date

Lacey Rose
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):

Nyarah Jackson
Print Participant First and Last Name

8.24.15
Date

Jaime Crawford
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):

Deanna Johnson
Print Participant First and Last Name

5/24/15
Date

Deanna Johnson
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):

Natasha Jacques
Print Participant First and Last Name

05/17/15
Date

[Signature]
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.

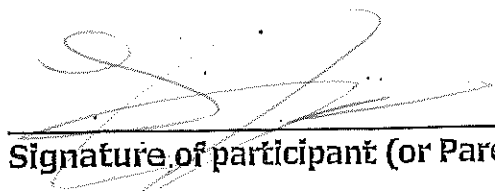
In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Lester Jackson

Print Participant First and Last Name

5-24-15

Date



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):

Tamiah Jackson
Print Participant First and Last Name

3/15/15
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Mymera Jackson
Print Participant First and Last Name

3/15/15
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Glover Jackson
Print Participant First and Last Name

3/15/15
Date

[Signature]
Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Hyheim Johnson
Print Participant First and Last Name

11/16/2015
Date

[Signature]
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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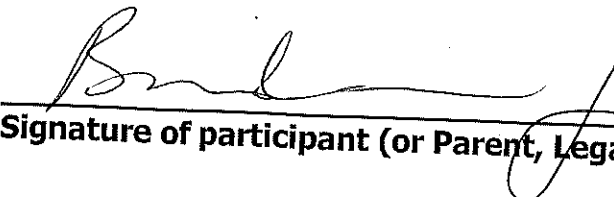
Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's 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):

Brendan Jamieson
Print Participant First and Last Name

2/27/18
Date


Signature of participant (or Parent, Legal Guardian or Legal Custodian 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):

Emma Jamieson

Print Participant First and Last Name

2/27/15

Date

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

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):

A'onesty Johnson

Print Participant First and Last Name

1-11-15

Date

[Signature]

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

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):

Emily Johnson
Print Participant First and Last Name

12/14/14
Date

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

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.

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):

ANIESA JONES
Print Participant First and Last Name

12/17/17
Date

R. Brown

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