

## 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):**

Natalie Kretzer  
Print Participant First and Last Name

4-24-16  
Date

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



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Mark S. Friedlander

**Print Participant First and Last Name**

5-6-16

**Date**

Emil f

**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):**

Bridger Kluver  
Print Participant First and Last Name

5/6/16  
Date

[Signature]  
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):**

Lynn Kelly

Print Participant First and Last Name

April 1, 2016

Date

*[Signature]*

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):**

WILLOW KITTLESSEN  
Print Participant First and Last Name

4.1.2014  
Date

Harriet Edelen  
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):**

RYAN KISH  
Print Participant First and Last Name

04/15/16  
Date

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

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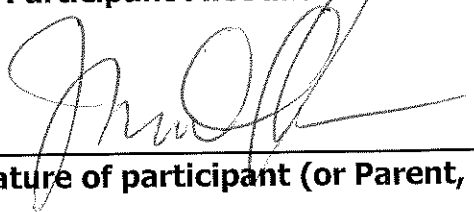
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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

MEGAN KISH  
Print Participant First and Last Name

04/15/16  
Date

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

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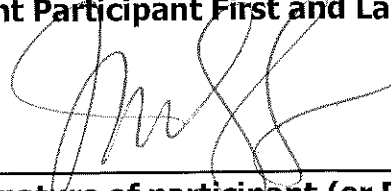
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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

MARIANNE KISH  
Print Participant First and Last Name

04/15/16  
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):**

Dasha Kirlaw  
Print Participant First and Last Name

10/11/15  
Date

Dasha Kirlaw  
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):**

Gabrielle Kautner  
**Print Participant First and Last Name**

10/16/15  
**Date**

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



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GARYA KYSA  
Print Participant First and Last Name

10/25/15  
Date

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

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CJ KYSAK  
Print Participant First and Last Name

10/25/15  
Date

Michael B. Kysak CJ KYSAK  
Signature of participant (or Parent, Legal Guardian or Legal Custodian if under 18)

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MICHAEL KY SAR  
Print Participant First and Last Name

10/25/15  
Date

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

CHARLOTTESVILLE



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**Print Participant First and Last Name**

  
**Date**

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



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Remy Kuecker  
**Print Participant First and Last Name**

11/13/15  
**Date**

[Signature]  
**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):**

Lisa Kuecker  
Print Participant First and Last Name

11/13/15  
Date

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

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Cy Keesecker  
Print Participant First and Last Name

11/13/15  
Date

Laura Salvatore  
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):**

Eve Kendrick  
Print Participant First and Last Name

11-4-15  
Date

Mildred A. Carson  
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):**

Harris Kwame

**Print Participant First and Last Name**

12/13/15

**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):**

Kelsey Kamba  
Print Participant First and Last Name

12-27-15  
Date

Janette Shippert  
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):**

ROBERT KLAPMUST  
Print Participant First and Last Name

11/3/2016  
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.

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):**

JAMES KLAPMUST  
Print Participant First and Last Name

~~12/27/15~~ 1/3/2016  
Date

Jim D. [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):**

Anders Korn  
Print Participant First and Last Name

8/13/2014  
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):**

Harper Katerakis  
Print Participant First and Last Name

1/15/16  
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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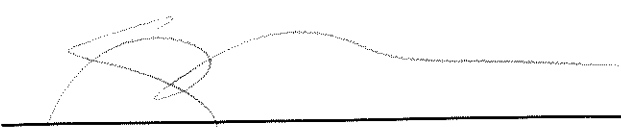
Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's 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):**

Grayson Kakevanz  
Print Participant First and Last Name

1-15-16  
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):**

Susan Kabevics  
Print Participant First and Last Name

1/15/16  
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):**

Tim Kulberg's  
Print Participant First and Last Name

1.15.16  
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):**

Muriel Kahol  
Print Participant First and Last Name

2/21/16  
Date

[Signature]  
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):**

Anna Kaplan  
Print Participant First and Last Name

October 9, 2015  
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):**

Christine Kobza  
**Print Participant First and Last Name**

8/28/15  
**Date**

Christine Kobza  
**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):

AMAYA KIMLEY  
Print Participant First and Last Name

8/16/15  
Date

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

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):

MELLYNA KIMLEY  
Print Participant First and Last Name

8/16/15  
Date

[Signature]  
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):

Jim Kinley  
Print Participant First and Last Name

8/16/15  
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.

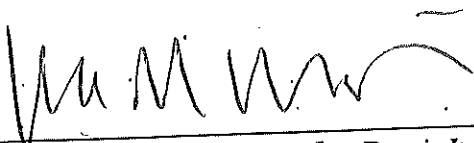
In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):

Liam Kelley

Print Participant First and Last Name

Date

8/14/15



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):

Teagan Kelley  
Print Participant First and Last Name

8/14/15  
Date

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

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):**

Emmy Katz  
Print Participant First and Last Name

7/19/15  
Date

[Signature]

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):

Casey Kuster  
Print Participant First and Last Name

8/9/15  
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):**

Emilee Kiesel  
Print Participant First and Last Name

05/31/15  
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.

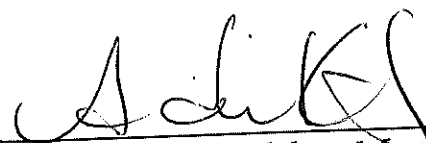
**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Sawyer Kinley

Print Participant First and Last Name

6/7/15

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):**

Andrew Kiley

Print Participant First and Last Name

6/7/15

Date

Andrew Kiley

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):

Eleanor Kahn  
Print Participant First and Last Name

6/21/15  
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):**

Emerson Kahn  
Print Participant First and Last Name

6/29/15  
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):

Diamond Keyes  
Print Participant First and Last Name

7/3/15  
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):**

Matteo Kartz  
Print Participant First and Last Name

7/19/15  
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):**

Janeline Knox  
Print Participant First and Last Name

3.18.16  
Date

Laurea Knox  
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):**

Jay Kamlani  
Print Participant First and Last Name

Mar 6 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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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):**

Sina Kornblum  
Print Participant First and Last Name

Mar 6 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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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 Hamilton  
Print Participant First and Last Name

Mar 6, 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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**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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**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):**

Jim Keller  
Print Participant First and Last Name

2/1/14  
Date

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

**ROLLER SKATING  
Liability Release Waiver Form**

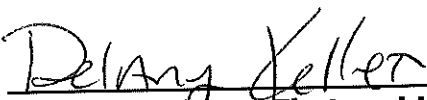
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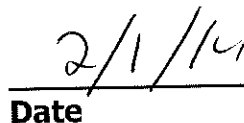
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**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**



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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**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):**

Assia Konyeyun  
Print Participant First and Last Name

2/13/15  
Date

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

**ROLLER SKATING  
Liability Release Waiver Form**

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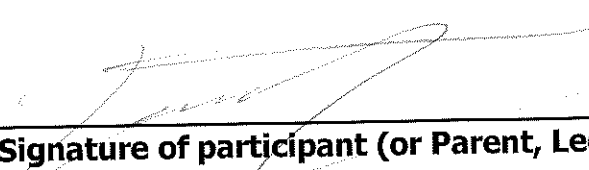
Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's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

Tatiana Kersten  
**Print Participant First and Last Name**

2/15/15  
**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):**

Ethan Kesser  
Print Participant First and Last Name

3.22.2015  
Date

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

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):**

Liv Kesser

**Print Participant First and Last Name**

3.22.2015

**Date**

Jonny Kesser

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

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):**

Ethan Kesser

Print Participant First and Last Name

March 16, 2015

Date

Gunnar Kesser

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

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):**

Hla Kyi  
Print Participant First and Last Name

3/20/15  
Date

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

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):**

Susma Koria  
Print Participant First and Last Name

3/22/2015  
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):**

Ella Kearns  
**Print Participant First and Last Name**

3/27/15  
**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):**

Leah Klein  
Print Participant First and Last Name

4-17-15  
Date

Noelle Klein  
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):**

Noelle Klein  
Print Participant First and Last Name

4-17-15  
Date

Noelle Klein  
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):**

Sabim Karki  
Print Participant First and Last Name

March 29, 2015  
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):

Anna Ristner  
Print Participant First and Last Name

5/29/15  
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):**

FELIX REITH  
Print Participant First and Last Name

2/11/15  
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):**

MICHAEL KETH  
Print Participant First and Last Name

2/1/15  
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):**

Agnes Kim  
**Print Participant First and Last Name**

2/27  
**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):**

Laurie Kelly  
**Print Participant First and Last Name**

2/1/15  
**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):**

Carter Kelly  
**Print Participant First and Last Name**

2/1/15  
**Date**

Carter Kelly  
**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):

SARAH SHALEESA

Print Participant First and Last Name

1/16/15  
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):

Reynolds Myer  
Print Participant First and Last Name

1-16-15  
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.

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):**

Zoë Kershner

**Print Participant First and Last Name**

1/25/15

**Date**

[Signature]

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

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

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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):

Camryn Koschard  
Print Participant First and Last Name

12/5/14  
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):

Aaron Kelly  
Print Participant First and Last Name

11/11/15  
Date

A Kelly  
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):

Piper Kelly  
Print Participant First and Last Name

4/11/15  
Date

A Kelly  
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):**

Evelyn Kahn

**Print Participant First and Last Name**

1/29/2015

**Date**

Catherine Mat

**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):**

Alexander Kaplan  
**Print Participant First and Last Name**

2/27/2015  
**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):**

Claire Kallen  
Print Participant First and Last Name

2/19/15  
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):**

Jennifer Keltz

Print Participant First and Last Name

2/27/2015

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):**

*Zoe Kusyk*

**Print Participant First and Last Name**

*02-14-15*

**Date**

A handwritten signature in dark ink, appearing to be "Zoe Kusyk", written over a horizontal line.

**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):**

Ikhlas Khan

**Print Participant First and Last Name**

1.10.16

**Date**

Carolyn Chen 434 825 7981

**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):**

Gloria Kim  
Print Participant First and Last Name

1/8/16  
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):**

Zamera Kier  
Print Participant First and Last Name

01/10/16  
Date

Erin M. Watts  
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):**

ANAMIKA KASHYAP  
Print Participant First and Last Name

06.26.15  
Date

M. Raydobreev  
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):**

Jonathan Korns  
Print Participant First and Last Name

06/05/15  
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):**

Amanda Kay  
Print Participant First and Last Name

3-8-15  
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):**

Katie Kraus  
Print Participant First and Last Name

3/8/15  
Date

Katie Kraus  
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):**

Sarankaytor

**Print Participant First and Last Name**

MARCH 22, 2015

**Date**

Sarankaytor

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

**ROLLER SKATING  
Liability Release Waiver Form**

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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):**

Daisy Kangas  
**Print Participant First and Last Name**

March 15, 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.

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):**

Smah Kate Kangas  
**Print Participant First and Last Name**

March 15, 2015  
**Date**

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

CHARLOTTESVILLE



## 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):**

Tastan Kampas  
Print Participant First and Last Name

March 15, 2010  
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):**

David Khurishanov  
Print Participant First and Last Name

3-1-15  
Date

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

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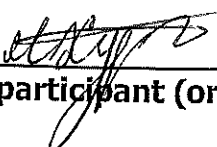
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I have read, and I understand the above Liability Release and Photo Permission.

**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):**

Madina Khurishanova  
Print Participant First and Last Name

3-1-15  
Date

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