

**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):**

Eleanor Smith  
Print Participant First and Last Name

7/10/16  
Date

Michelle Smith  
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):**

Zalyse Snowden  
Print Participant First and Last Name

6-19-16  
Date

Nancy Snowden  
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):**

Wesley Snowden  
Print Participant First and Last Name

6-19-16  
Date

Wesley Snowden  
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):**

Elijah Snowden  
Print Participant First and Last Name

6/19/14  
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):**

Priyanka Sampson  
Print Participant First and Last Name

5/27/16  
Date

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

CHARLOTTESVILLE



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

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

DARREN SAYLOR  
Print Participant First and Last Name

5-22-16  
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):**

Savannah Secor  
Print Participant First and Last Name

5-22-14  
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):**

Elijah Summer  
Print Participant First and Last Name

24/17/10  
Date

Sumette Walker  
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 Stanfield

**Print Participant First and Last Name**

April 17th 2016

**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):**

Sarah Sharpe  
Print Participant First and Last Name

9-10-16  
Date

Sarah W Sharpe  
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):**

Alex Sieber  
Print Participant First and Last Name

4/10/16  
Date

Alex Sieber  
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):**

Elizabeth Steiner  
Print Participant First and Last Name

4/10/16  
Date

David Steiner  
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):**

Chellie Smith

**Print Participant First and Last Name**

4-8-16

**Date**

Chellie Smith

**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):**

MacAlister Suchocki  
Print Participant First and Last Name

4/3/2016  
Date

Patricia Suchocki  
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):**

Zoe Suchocki  
Print Participant First and Last Name

4/3/2016  
Date

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

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Patricia Suchocki

**Print Participant First and Last Name**

4/3/2016

**Date**

Patricia Suchocki

**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):**

Shirley Smith  
Print Participant First and Last Name

3/20/16  
Date

I H  
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):**

Keisha Smith  
Print Participant First and Last Name

10-10-11  
Date

Keisha Smith  
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):**

JoAnne Seay  
Print Participant First and Last Name

3-25-2016  
Date

JoAnne Seay  
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 Stewart  
Print Participant First and Last Name

03/20/16  
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):**

Kate Sherwood

**Print Participant First and Last Name**

3-20-16

**Date**

Carol Sherwood

**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):**

Tilman Sherwood  
Print Participant First and Last Name

3/20/16  
Date

Carol Sherwood  
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):**

Carol Sherwood  
Print Participant First and Last Name

3/20/16  
Date

Carol Sherwood  
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):**

Evan Spielman  
Print Participant First and Last Name

3/20/16  
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):**

Sylvie Seaman Hack  
Print Participant First and Last Name

3/13/16  
Date

Aunt  
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):**

Cadenze Sperrer 03/13/16  
Print Participant First and Last Name 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):**

Noriyama Shifflett  
Print Participant First and Last Name

03/13/16  
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):**

Carlyiah M. Scott  
Print Participant First and Last Name

3/4/16  
Date

William B. Rupp  
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):**

Charissa Shelton 2/28/16  
Print Participant First and Last Name Date

Donelle Shelton  
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):**

Kristen Shelton 2/58/14  
Print Participant First and Last Name Date

David A. Shelton  
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):**

Megan Sheltor  
Print Participant First and Last Name

Date

2/28/11

Megan Sheltor  
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):**

Gerard Shelton  
Print Participant First and Last Name

2/28/16  
Date

Danille Shelton  
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):**

Wael Shueib  
Print Participant First and Last Name

02/19/16  
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):**

Svetlana Steyns Long  
Print Participant First and Last Name

02/19/16  
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):**

Polina Shevchenko  
Print Participant First and Last Name

02/19/16  
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):**

Jahsir Smith  
Print Participant First and Last Name

2/7/16  
Date

Rebecca Morlan  
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):**

Michael Salvatierra  
Print Participant First and Last Name

2/12/16  
Date

Michael Salvatierra  
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.

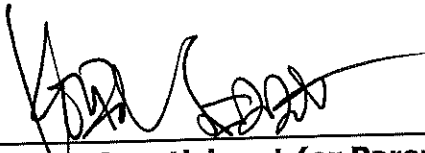
**In witness whereof, I have executed this Liability Release and Photo Permission as my own free act. (Participant Parent, Legal Guardian or Legal Custodian, must sign if participant is under 18 years of age):**

Sam Sidders

Print Participant First and Last Name

Feb. 14, 2016

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):**

Corbin Staton  
Print Participant First and Last Name

2/14/16  
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.

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):**

JULIA STEINBERG  
Print Participant First and Last Name

2/14/16  
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.

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):**

KATARINA STEINBERG  
Print Participant First and Last Name

2/14/16  
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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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):**

MAKAYLA STEINBERG  
Print Participant First and Last Name

2/19/16  
Date

Mark Steinberg  
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):**

Dustin Steinberg  
Print Participant First and Last Name

2/17/16  
Date

Dustin Steinberg  
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):**

Mark Steinberg  
Print Participant First and Last Name

2/14/16  
Date

Mark Steinberg  
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):**

Avery Shearer  
Print Participant First and Last Name

2-19-16  
Date

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

CHARLOTTESVILLE



## ROLLER SKATING Liability Release Waiver Form

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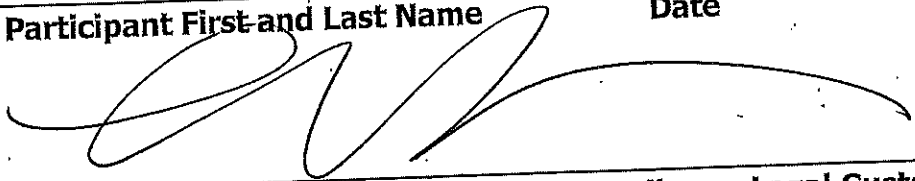
Photo Permission by Parent, Legal Guardian or Legal Custodian: I give the City of Charlottesville, its officials and employees, to photograph or videotape the above-named participant, who is a juvenile, during his or her participation in the Recreation Program. I understand and agree that the participant's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

Lincoln Shaw  
Print Participant First and Last Name

2.19.16  
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):**

Tijwana Sims  
Print Participant First and Last Name

1/15/16  
Date

Tijwana Sims  
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):**

Taziyah Sims  
Print Participant First and Last Name

1/15/16  
Date

Alywana Sims  
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):**

Jeanne Smith  
Print Participant First and Last Name

1-15-16  
Date

Jeanne Smith  
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 Smith  
Print Participant First and Last Name

15 Jan 16  
Date

Stephen Smith  
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):**

Peter Smith  
Print Participant First and Last Name

15 Jan 16  
Date

Agate Smith  
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):**

Oliver Smith  
**Print Participant First and Last Name**

15 Jan 16  
**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):**

Stephen Smith  
Print Participant First and Last Name

15 Jan 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):**

Caleb Smith

**Print Participant First and Last Name**

15 Jan 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):**

Michelle Skiff  
Print Participant First and Last Name

C1-8-16  
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):**

MONICA STAN  
Print Participant First and Last Name

11/20/2015  
Date

Simona Boticeanu

**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):**

Jeremiah Smith  
Print Participant First and Last Name

11-15-15  
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):**

Jen Smith  
Print Participant First and Last Name

11/22/2015  
Date

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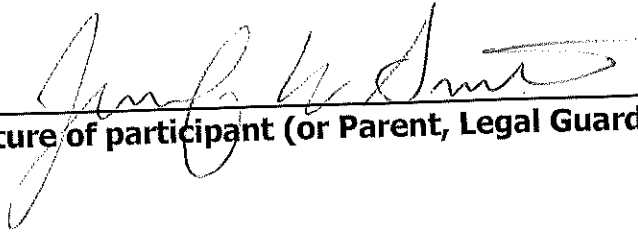
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I have read, and I understand the above Liability Release and Photo Permission.

**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 Smith  
**Print Participant First and Last Name**

11/22/15  
**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):**

Raleigh Smith  
Mica

**Print Participant First and Last Name**

6-21-15  
**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):**

Kyaisa Spruill  
Print Participant First and Last Name

12/6/15  
Date

Allison Rose  
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):**

Owen Sty  
Mike Sty

\_\_\_\_\_  
**Print Participant First and Last Name**

12/13/15  
\_\_\_\_\_  
**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):**

Annabelle Statute  
Print Participant First and Last Name

9/20/15  
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):

Mackenzie Springer  
Print Participant First and Last Name

9/20/15  
Date

Mackenzie Springer  
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):**

Tanya Stanciu

**Print Participant First and Last Name**

10-2-2015

**Date**

Tanya Stanciu

**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):**

Noah Salvatierra  
**Print Participant First and Last Name**

10/2/15  
**Date**

Noah Salvatierra  
**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):**

Laura Salvatierra

**Print Participant First and Last Name**

10/2/15

**Date**

Laura E. Salvatierra

**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):**

Olivia Saunders  
Paul Saunders  
\_\_\_\_\_  
**Print Participant First and Last Name**

10/4/15  
\_\_\_\_\_  
**Date**

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

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

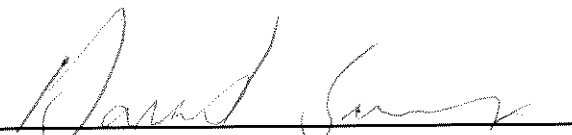
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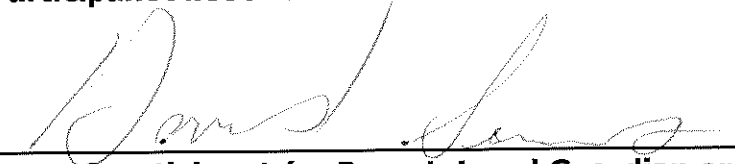
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I have read, and I understand the above Liability Release and Photo Permission.

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

  
\_\_\_\_\_  
**Print Participant First and Last Name**

  
\_\_\_\_\_  
**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):**

Nadia Storkes  
Print Participant First and Last Name

10/9/15  
Date

Nadia Storkes  
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):**

Yadav Sapkota  
**Print Participant First and Last Name**

10/9/015  
**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):**

Sofia Senator  
Print Participant First and Last Name

10/9/15  
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):**

Jack Sopata

**Print Participant First and Last Name**

10/9/15

**Date**

aler

**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):**

Lilly Sopata  
Print Participant First and Last Name

10/9/15  
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):**

Delroy A. Smith  
Print Participant First and Last Name

10/11/15  
Date

Delroy A. Smith  
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):**

Caden Scott  
Print Participant First and Last Name

10/18/15  
Date

Sarah Scott  
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):**

Hannah Scott  
Print Participant First and Last Name

10/18/15  
Date

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

**ROLLER SKATING  
Liability Release Waiver Form**

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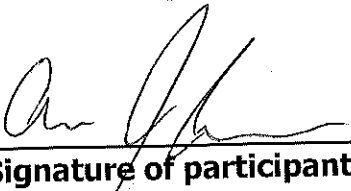
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I have read, and I understand the above Liability Release and Photo Permission.

**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 Seng  
Print Participant First and Last Name

Oct 18, 2015  
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):**

Christina Seng  
Print Participant First and Last Name

Oct 18 2015  
Date

Clt Seng  
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):**

Delilah Seng  
Print Participant First and Last Name

Oct 18, 2018  
Date

CDJ  
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):**

Cordelia Seng  
Print Participant First and Last Name

Oct 18 2015  
Date

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

**ROLLER SKATING  
Liability Release Waiver Form**

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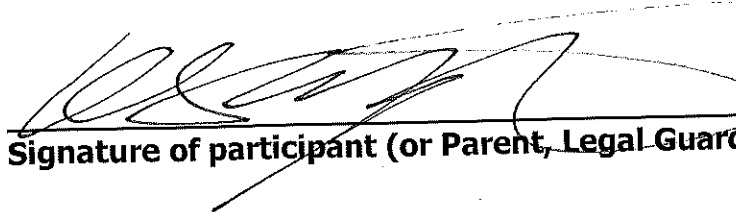
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I have read, and I understand the above Liability Release and Photo Permission.

**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):**

Abbey ~~COLE~~ STIFFLER  
Print Participant First and Last Name

10/18/15  
Date

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



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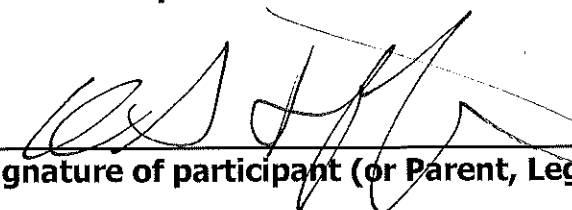
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I have read, and I understand the above Liability Release and Photo Permission.

**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):**

CHARLIE STIFFLER  
Print Participant First and Last Name

10/18/15  
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):**

Joshua Staton  
Print Participant First and Last Name

10/23/15  
Date

Joshua Staton  
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):**

Melissa Stepp  
Print Participant First and Last Name

10/22/15  
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):**

NOBIR2001 Self  
Print Participant First and Last Name

29 NOV 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):**

Shannon Self JR.  
Print Participant First and Last Name

29-NOV-15  
Date

Shannon Self  
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):**

Shannon Self SK  
Print Participant First and Last Name

22 NOV 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):**

Nathan Schemansky  
Print Participant First and Last Name

11/08/15  
Date

Chellana  
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):**

Cillian Shewalter  
Print Participant First and Last Name

11.20.15  
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):**

McLean Stokes  
\_\_\_\_\_  
Print Participant First and Last Name

11/2/15  
\_\_\_\_\_  
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):

Nakiyah Sorensen  
Print Participant First and Last Name

9/11/2015  
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):**

Adanyah Sorensen  
Print Participant First and Last Name

9/11/2015  
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):**

Sequoyah Sorensen  
Print Participant First and Last Name

9/11/2012  
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):**

Ross Stark  
Print Participant First and Last Name

9/13/15  
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):**

Josiah Sorenson  
Print Participant First and Last Name

9/18/15  
Date

Linnell W. Sorenson  
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):

Tobiah Sorenson  
Print Participant First and Last Name

9/18/15  
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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**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):**

Virginia Santiago  
Print Participant First and Last Name

9/20/15  
Date

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