

**ACKNOWLEDGEMENT OF RISK
ACCEPTANCE OF RESPONSIBILITY
RELEASE OF LIABILITY**

This document affects your legal rights. You must read and understand it before initialing or signing.

DUTY OF PARTICIPANTS: It is recognized that skating activities are hazardous to participants regardless of all feasible safety measures we can take. All participants shall have a duty to act as a reasonably prudent person when engaging in the recreational activities which are offered by Mount Olivet united Methodist Church, referred to hereafter as MOUMC, I hereby covenant and agree not to:

- (a) Interfere with the running or operation of MOUMC when such activities conform to the rules and regulation of the state of Pennsylvania;
- (b) Use any of MOUMC equipment or facilities or services if I do not have the ability to use such facilities, equipment, or services safely without instructions until I have requested and received sufficient instruction to permit safe usage;
- (c) Engage in any harmful conduct or willfully, or negligently engage in any type of conduct which contributes to as causes injury to any person;
- (d) To embark in any self-initiated activity without first informing MOUMC of my intentions and receiving permission from MOUMC to engage in such self-initiated activity.

ACKNOWLEDGEMENT AND ACCEPTANCE OF RISK: I understand that the activity which I am about to voluntarily engage in as a participant and/or volunteer bears certain known risks and unanticipated risks which could result in injury, death, illness or disease, physical or mental, or damage to myself, to my property, or to spectators or other third-parties.

I, being aware that this activity entails risks or injuries to myself and a risk for injury to spectators or third-parties as a result of my actions, expressly agree, covenant and promise to accept and assume all responsibility and risk for injury, death, illness, or disease, or damage to myself or to my property arising from participating in this activity. I also agree to pay for any damage caused to others (including attorneys' fees and cost) if they are injured or otherwise damaged due to any negligent actions.

My participation in this activity is purely voluntary; no one is forcing me to participate, and I elect to participate in spite of the known and unknown risks.

RELEASE: In consideration of the services and/or property provided, I, for myself and any minor children for which I am the parent, legal guardian, or otherwise responsible, any heirs, personal representatives, or assigns, do hereby release MOUMC its principals, directors, officers, agents, employees, and volunteers from liability and waive any claim for damages arising from any cause whatsoever (except that which is gross negligence). I further agree to reimburse you for all attorney's fees and costs should I bring a legal action against you and lose.

ENTIRE AGREEMENT: I understand that this is the entire Agreement between myself and MOUMC its agents or employees, and that it cannot be modified or changed in any way by the representations or statements of any employee of MOUMC or by me.

My signature below indicates that I have read this entire document, understand it completely and agree to be bound by its terms.

Date: _____

Signature of Participant

Print Name

Signature of Parent or Guardian Print Name (if participant is under age of 18)

Emergency Information:

Doctor's Name: _____ Phone: _____

Dentist's Name: _____ Phone: _____

Emergency Contact Name, relationship and telephone numbers

_____	_____	_____
Name	Relationship	evening. Phone #

Cell phone

Preferred Hospital: _____