

# ROCKCITY SKATEPARK ADULT REGISTRATION FORM

## Unsupervised skateboarding, inline skating, scootering or biking

### Skatepark Participation Statement

*I fully understand and acknowledge that there are risks and dangers associated with participation in skateboarding, inline skating, BMX/biking and scootering which could result in bodily injury; partial and/or total disability; paralysis or death. As a result of this knowledge, I will not hold the management, directors, staff or volunteers of Rockcity Skatepark responsible for any accidents; injury; loss or damage whilst on the premises. By signing this registration form, I confirm that I have fully understood the Conditions of Use and Rules and have been strongly advised by Subculture Skatepark that I should wear full protective equipment whilst using this Skatepark. I hereby agree to accept full responsibility for my actions during participation at Rockcity Skatepark.*

### Personal Details

Title		First Name		Surname	
Male / Female		Address			
Date of Birth					
Tel No.					
Emergency Tel No.					
Emergency Contact					
		Email			

### Conditions of Registration

If you are under 18 years of age DO NOT fill in this form. Please ask at reception for the correct form.

Once you have read the Conditions of Use and Rules of this Skatepark you must answer the following questions by writing either "YES" or "NO" in the box provided, then sign the declaration at the bottom of the form. Only skaters / riders who give satisfactory answers to these questions will be registered and allowed to use the skatepark unsupervised.

Are you over 18 years of age? .....	
Have you read and understood the Conditions of Use and Rules of the skatepark? .....	
Are you aware that the recommendations to use safety equipment may reduce the severity of injuries? .....	
Do you understand that failure to exercise due care could result in injury or death? .....	
Do you have any questions regarding the application of the Conditions of Use or the Rules? .....	
Do you agree to abide by the Conditions of Use and Rules of skatepark? .....	

**Declaration of fitness** I certify that to the best of my knowledge, I do not suffer from a medical condition which might have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.

**Declaration of fact** I also confirm that the above information is correct and if any information changes I will notify the centre:

Signature		Date	
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### THIS PART TO BE FILLED IN BY THE RECEPTION STAFF

Registration No.		Registration Type	
Amount Paid for Registration	£	Have you asked a sample question?	
Signature		Date	