ID No.	
ID NO.	

CITY OF SARASOLA

City of Sarasota - Skate Park

PARENTAL CONSENT AND VOLUNTARY PARTICIPATION AND ACKNOWLEDGMENT FORM

(UNDER 18 YRS.)

Last Name of Minor:	First Name of Minor:			Date of Birth of Minor:	
Last Name of Parent/ Guardian	First Name of Parent/ Guardian			Date of Birth of Parent/ Guardian:	
Minor's Address:					
City:	State:	Zip Code:			
Parent/ Guardian Phone: ()	Parent/ Guardian Email:				
Emergency Contact:		Phone:	()		
Medical Alert:					
Parental/Guardia	an Consent and Acknowledgmen	nt of Voluntary	<u>Participati</u>	on and City Immunity	
skating and that these risks a officers, agents or employees 2. The undersigned Parent/Gua		cipate in skatel that: gnizes the risks own, even if ari due to his/her this Participatio	and dangers sing from th voluntary pa n and Ackno	s inherent in skateboarding te negligence of the City (in articipation.	and/or inline icluding its
	and all liability, including its own n such activity.	negligence, fo	r any person	al injury, death or damage	that arises out
Acknowledgment Form.		P			
Parent/Gua	rdian Signature			Date	
	DOCUMENT MUST BE	WITNESSED	BELOW		
STATE OF FLORIDA COUNTY OF SARASOTA WITNESS:					
Signature:					
Print Name:					
Date:					