

## **Currituck County**

County Attorney 153 Courthouse Road, Suite 210 Currituck, North Carolina 27929 252-232-0300 FAX 252-232-3551

## ICE SKATING WAIVER FORM

Ice skating is an inherently risky and physically demanding exercise, which the participant and/or their parent(s) or guardian understands, acknowledges, and agrees.

While participating in activities at the Ice Skating Rink at Historic Corolla Park, the Skater acknowledges all responsibility for any risk of injury, property damage, or death.

Participant or guardian hereby waives any and all claims they may have against Ice Skating at Historic Corolla Park, and Currituck County as sponsor of the ice rink, as well as their subsidiaries, affiliates, partners, officers, directors, employees, agents, and volunteers, arising out of Participant's use of the Ice Skating Rink and all surrounding areas on the grounds of Historic Corolla Park.

The Participant agrees to obey the "Code of Skater Responsibility," which is posted in the Ice Skating Rink area, for the usage of the Ice Skating Rink, as well as the instructions of the Ice Skating Rink's operating personnel.

Participants' use of the Ice Skating Rink, the rental ice skates, and the surrounding areas may be terminated without return if they do not respect these norms of conduct.

I understand that my child's photo or video may be taken and used for promotional purposes by the Currituck County Tourism Department. I authorize my/my child's photo or video to be used for such promotional purposes.

I further acknowledge and agree that I have signed this agreement on behalf of, and that this agreement shall be binding upon, myself, my child or other family members, heirs, estates, administrators, assigns, and personal representation, and further agree that this Agreement shall be interpreted under the laws of the State of North Carolina, and the State and Federal laws of the State of North Carolina shall have exclusive jurisdiction of any claims arising under this Agreement.

Name of Skater:	
Age of Skater:	Date:
Name of Guardian:	
Signature of Guardian:	