

ACKNOWLEDGEMENT OF RISK and RELEASE of MADISON SPEED SKATING CLUB, INC.

I understand that that speedskating is a sport which involves significant risk of injury, including, but not limited to, serious and possible life-threatening, bodily injury, and that activities ancillary to speedskating, such as dry land training, including, but not limited to, vigorous exercise, rollerblading and bicycling, and travel to practice sessions and speedskating competitions, entail similar risks, and recognizing that there is a risk that personal property of mine, or that of my below-named child, may be lost or damaged at or in connection with activities sponsored by or carried out by the Madison Speed Skating club, Inc., by itself or together with other organizations or individuals, I hereby, for myself, my heirs, executors, administrators, and assigns, waive and release any and all rights and claims for damages which I or, if I am signing as parent or guardian, the below-named child, may have against any of the Madison Speed Skating Club, Inc., County of Dane, Wisconsin, the City of Madison, Wisconsin, the Village of Oregon, Wisconsin, the Oregon Community Sports Arena, US Speedskating, and any and all of their members, officers, officials, and assigns, for any and all injuries and loss of life and any of and all injuries and loss of life and any and all loss or damage of personal property suffered by me, or that of my below-named child(ren), at or in connection with any activity carried out by or sponsored by the Madison Speed Skating Club, Inc., by itself or together with any other organization or individual.

LIABILITY RELEASE of WISCONSIN SPEEDSKATING ASSOCIATION, INC., (WSA)

I understand that speedskating is a dangerous activity. I assume the risk that such activity could result in my bodily harm or death. On behalf of myself and my beneficiaries, in exchange for the opportunity to engage in speedskating under the circumstances offered to me, I hereby waive any claims of negligence against WSA and its employees or agents arising out of my skating or the skating of others. I recognize that I can bargain with WSA to provide better equipment, facilities, and training for my protection at a significantly increased price, but I decline to do so.

NAME OF SKATER: _____

SIGNATURE: _____ DATE: _____

If skater is under 18 years of age:

PARENT/GUARDIAN: _____

SIGNATURE: _____ DATE: _____

Skater Info:

Birthdate: _____ Age as of July 1st: _____ Gender: _____

E-mail: _____ Best Phone: _____

Home Address: _____

Emergency Contact: Name: _____

Relationship: _____ Phone: _____