

**LIABILITY WAIVER FORM**

**WAIVER, PARENTAL WAIVER AND RELEASE OF LIABILITY**

I, the undersigned, parent or legal guardian, acknowledge the inherent risk involved in ice skating, and all sports relating thereto. Accordingly, in consideration of myself, or my child being allowed to participate in any skating activities and/or other activities at the ice rink facility commonly known as "Kenosha Ice Arena" located at 7727 60th Ave, Kenosha, WI 53142.

1. I ACKNOWLEDGE AND FULLY UNDERSTAND THAT I (and/or child) WILL BE ENGAGING IN ACTIVITIES THAT INVOLVE RISK OF SERIOUS INJURY WHICH MIGHT RESULT NOT ONLY FROM MY (and/or child's) ACTIONS, BUT ALSO FROM THE ACTION, INACTION OR NEGLIGENCE OF OTHERS; AND FURTHER, THAT THERE MAY BE RISKS NOT KNOWN TO ME OR NOT REASONABLY FORESEEABLE. I ALSO ACKNOWLEDGE AND FULLY UNDERSTAND THAT I (and/or child) CANNOT PARTICIPATE IN ANY ACTIVITIES IF I (and/or child) HAVE RECENTLY SUFFERED FROM ANY FEVER, SORE THROAT, VOMITING, DIARRHEA, OR ANY OTHER COMMUNICABLE SYMPTOMS OR HAVE BEEN EXPOSED RECENTLY TO SOMEONE WITH THESE SYMPTOMS. I FURTHER ACKNOWLEDGE THAT OTHER PARTICIPANTS IN THESE ACTIVITIES MAY BE INCUBATING DISEASES INCLUDING COVID-19, AND MAY BE CAPABLE OF SPREADING DISEASE TO OTHERS.

2. ON BEHALF OF MYSELF (or my child), I AGREE TO ASSUME ALL THE FOREGOING RISKS AND ACCEPT PERSONAL RESPONSIBILITY FOR MY OWN DAMAGES FOLLOWING SUCH INJURY OR SICKNESS.

3. ON BEHALF OF MYSELF (or my child), I RELEASE, DISCHARGE, WAIVE AND COVENANT NOT TO SUE KENOSHA ICE ARENA, KENOSHA BLUE LINE HOCKEY CLUB, WISCONSIN JETS HOCKEY CLUB, THEIR AFFILIATES, ASSOCIATES, OFFICERS, DIRECTORS, OWNERS, AND EMPLOYEES (COLLECTIVELY "RELEASEES") FROM DEMANDS, LOSSES OR DAMAGES ON ACCOUNT OF ANY SICKNESS, INJURY, DEATH OR DAMAGE TO PROPERTY, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY RELEASEES OR ANY OTHER PARTY'S ACTIONS, INACTION, OR OTHERWISE; AND AGREE TO INDEMNIFY RELEASEES FROM ANY AND ALL THIRD PARTY CLAIMS CAUSED IN WHOLE OR IN PART BY MY (or child's) ACTIONS from September 7, 2020 to December 31, 2020.

I have read the above Waiver and Release, and understand that by signing below, I have given up substantial rights on behalf of myself or my child.

Name of Participant (printed): \_\_\_\_\_

Signature of Participant  
Parent or Legal Guardian: \_\_\_\_\_

Printed Name of Parent  
or Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_ Contact # \_\_\_\_\_