

Oswego Figure Skating Club, Inc. Collegiate Membership

Member			
Date of Birth	USFSA #	Local Phone:	Cell Phone
Address		Local Address:	
City	State	ZIP	
Local City	State	ZIP	
Emergency Contact/Phone		Primary E-mail	
USFSA Collegiate Member Registration (7/1/2009 through 6/30/2013)			\$80.00

Oswego Figure Skating Club, Inc. Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement ("Agreement")

In consideration of participating in Oswego Figure Skating Club, Inc. (OFSC, Inc.) activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health and in proper physical condition to participate in such "activity." I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity."

I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the "activity," condition in which the "activity" takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the "activity."

I hereby release, discharge, and covenant not to sue the OFSC, Inc., United States Figure Skating, it's directors, officers, administrators, sponsors, volunteers, agents, employes, staff, instructors, trainers, other participants and if applicable, owners and lessors of premises on which the "activity" takes place (each considered one of the "releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I futher agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

The OFSC, Inc. has the right, but not the obligation, to provide rules, regulations and/or ice monitors for club ice. We hereby acknowledge that the OFSC, Inc. shall not be responsible for the supervision of the members at club ice.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant

Signature of Participant/Participant's Representative

Date

CONSENT FOR MEDICAL ATTENTION OR TREATMENT

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the Oswego Figure Skating Club, Inc. and the facility the activities are taking place in and their staff and to members of the OFSC, Inc., their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and/or said participant for any injury that could arise from participation in these activities.

Printed Name of 1st Adult Member

Signature of 1st Adult Member

Date

This consent for Medical Attention shall be binding and effective for the 2009-2010 membership year of Oswego Figure Skating Club, Inc.