

Town of Branford Parks & Recreation

PARENTAL/GUARDIAN CONSENT FORM

Minor's Name: _____ : Date of Birth: _____

Legal Parent/Guardian: _____

Address of Parent/ Guardian: _____

City: _____ State: _____ Zip: _____ Phone _____ Cell _____

Address of Minor (if different from Parent/Guardian) _____

PARENTAL CONSENT- Read before signing!

PURSUANT TO FLORIDA STATUE 316.0085 (3), (5), AND IN CONSIDERATION of Minor being permitted to participate in any way at Procko Skate Park

I _____, (name of parent/guardian) who is the legal parent/guardian of _____, **a minor under 17**, acknowledge, appreciate and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist even when these activities are conducted in accordance with all such rules. These activities are inherently dangerous: and,
2. **I knowingly and freely assume all such risk that naturally arise from the inherently dangerous activities of skateboarding, scootering or in-line skating**, both known and unknown, and I assume full responsibility for my participation: and, I understand that helmets and other safety equipment is highly recommended.

I have read this Parental/ Guardian Consent Form. I fully understand its terms. I sign freely and voluntarily. I understand that unless written Parental/Guardian consent is provided by this form to The Town of Branford, PRIOR TO MY MINOR'S PARTICIPATING, My Minor Under 17 Years SHALL NOT skate or participate in the park.

FOR PARTICIPATION BY MINOR UNDER 17 YEARS OF AGE
(Under age 17 at the time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent to the above-named Minor's use of Procko Skate Park for any purpose, including, but not limited to skateboarding, scootering, bmx biking, or in-line skating.

Legal Parent/Guardian Signature: _____

Print Name: _____

Date Signed: _____

Return this entire Consent Form in person or to the Drop Boxes at the following locations:

1.) Town of Branford
2.) 604 NW Suwannee Ave
Branford, FL 32008

2.) Hatch Park Community Center
403 SE Craven Street
Branford, FL 32008

Please direct questions to 386-935-1146 (Branford Town Hall).

