



ALL SKATEPARK USERS MUST READ AND UNDERSTAND THIS DOCUMENT AND CONSIDER IT CAREFULLY BEFORE SIGNING. THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS AND MAY RESTRICT OR PREVENT YOU BRINGING A LEGAL ACTION AGAINST THE OPERATOR OR THE COMPANY.

THE COMPANY IS VF NORTHERN EUROPE LIMITED – VANS DIVISION, WITH REGISTERED OFFICE AT 15, ATHOLL CRESCENT, EDINBURGH, EH3 8HA, UNITED KINGDOM, AND OPERATIVE OFFICES AT PARK ROAD EAST, CALVERTON, NOTTINGHAM NG14 6GD, UNITED KINGDOM.

THE OPERATOR OF THE HOUSE OF VANS IS SPARROW HOUSE LIMITED CO NUMBER 08795069. REGISTERED ADDRESS 111 HIGH STREET, BILLERICAY, ESSEX. CM12 9AJ

BY SIGNING THIS FORM YOU (AND ANYONE ELSE WHO MIGHT BE ABLE TO CLAIM ON YOUR BEHALF) RELEASE THE COMPANY AND THE OPERATOR (TOGETHER WITH THEIR RESPECTIVE EMPLOYEES, CONTRACTORS AND OFFICERS) TO THE GREATEST EXTENT PERMITTED BY LAW ALL CLAIMS DAMAGES ACTIONS OR DEMANDS RELATED TO THE RISKS IN HERENT IN USING THE SKATE PARK..

If you are under 18 years of age, please ask at Reception for a parental form which also need to be submitted.

Participation Statement:

“Skatepark activities have a **danger of personal injury or death**. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement. Additionally, appropriate safety protection is strongly advised to be worn at all times such as Helmet, Elbow Pads, Wrist Guards, Gloves and Knee Pads”.

Personal Details **Please complete the form in BLOCK CAPITALS**

FIRST NAME: SURNAME:

SEX: MALE FEMALE

DATE OF BIRTH

Address:
(street)

(Postal code) (city)
(country)

Home Tel. No. Mobile Tel. No.

E-mail address

Particular Medical Conditions: NO YES if YES please specify in the box below
(allergies, current medications...)

If NO **Declaration of Fitness: I certify that to the best of my knowledge, I do not suffer from a medical condition which might have the effect of making it more likely that I be involved in an accident which could result in injury to myself or others.**

Emergency Contact:

Full Name of Contact:

Relationship to Participant: MOTHER FATHER Family Member OTHER

Main Phone No. Secondary No.

Conditions of Registration:

Once you have read the **Rules and Terms and Conditions of the HOUSE OF VANS**, you must answer the following questions by writing either **“YES”** or **“NO”** in the box provided then sign the declaration at the bottom of the form. Only Skatepark participants who give satisfactory answers to the questions will be registered and allowed to participate.

Declaration of fact **I confirm that the above information is correct and if any information changes I will notify the centre. Furthermore I have provided my ID card.**

Signature:

Date: _____

I wish to use the skate park located in the premises of the HOUSE OF VANS (the **“Skate Park”**).

I verify that I have full knowledge of the rigors and risks involved in using the Skate Park and I understand that skating can be a dangerous sport. I am voluntarily using the Skate Park with knowledge of the dangers involved, including without limitation, the risks of disability, injury, loss, damages, or the negligence or deliberate act of another person and I agree to accept any and all aforementioned risks.

I understand that by entering into the premises of the Skate Park, I will be using facilities and/or areas where many hazards exist, and I am aware of and appreciate the risks which may result from my use of those facilities.

I am aware that accidents or illness can occur during skating and that I may be seriously injured as a result.

I acknowledge that I am solely responsible for my personal health and safety, and the personal property I bring with me.

I agree to respect the Skate Park’s rules, to respect other riders, to follow the organization’s recommendations for my safety while skating. I understand that not respecting these rules could lead to my exclusion from the Skate Park. The Operator will have the right to exxclude any individual or individuals at their absolute discretion..

In consideration for being permitted to skate in the Skate Park, I agree to assume all risks and to release in advance and hold harmless and discharge the COMPANY, the OPERATOR, all affiliated organizations, individuals and entities, first-aid volunteers, officials, participating communities, organizations, and all of their respective parent and subsidiary companies, officers, directors, agents, employees and members from any liability and to waive my rights with respect to any and all claims for damages personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my use of the Skate Park, even though this liability may arise through no fault of my own, or from the negligence or carelessness on the part of the persons or entities being released from other Skate Park users, from dangerous or defective property or equipment within the Skate Park, maintained or controlled by them or because of their possible liability without fault.

I understand that my name, photograph, voice or likeness may be used by the COMPANY for promotional and advertising purposes, directly and through third parties, including the featuring of all of the foregoing in promotional materials and the assignment of all the exploitation rights to third parties, partners of the COMPANY, and this without any right to compensation and without time limitation. In particular, the rights hereby assigned to the COMPANY will include all the utilisation and exploitation rights worldwide and have to be considered unlimited with reference to duration, content, territory and transmission device. I consent to and authorize, in advance, such use and waive any rights of privacy and/or publicity I may have in connection therewith.

I understand that, by entering and using the Skate Park, I consent that the personal information I submit with my entry being entered into a database and the COMPANY together with the OPERATOR may use this information for the purposes of the Skate Park.

In addition, with my specific consent which is optional, the COMPANY may also collect my personal data for statistical purposes as well as for marketing purposes, notably to send me periodic communications containing information on the COMPANY's products and/or services, as well as on its promotional or marketing initiatives, including possible invitations to said initiatives, it being understood that I can always oppose receiving marketing communications: every communication will contain a special section indicating the methods for withdrawing my consent.

I understand that all my personal details will be stored at the office of the OPERATOR. A request to access, update, correct or deletion any information should be directed to the hereinafter provided address of the operative offices of the OPERATOR.

Personal data are processed by the COMPANY and the OPERATOR in compliance with the security provisions as set forth by applicable laws and regulations in order to prevent loss of data, unlawful or unfair use of data and unauthorized access to data.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS.

I enter into this contract of my own free will and I understand and agree that this form is binding on my heirs, assigns, and legal representatives.

I give the consent to the processing of my personal data for marketing and profiling purposes

I do not give my consent to the processing of my personal data for marketing and profiling purposes

Signature: _____