

**MEDICAL RELEASE**

All competitors waive all claims for injury during the competition and during practice time while at the Utah Olympic Oval. The Utah Olympic Oval and the Oval Figure Skating Club will not be held responsible for any injuries. In consideration for acceptance of this application and participation in this event, I agree to assume all risks associated with participating in any activities of the competition, and hereby indemnify and hold harmless the U.S. Figure Skating, Oval Figure Skating Club, and the Utah Olympic Oval, and all their officers, employees and agents, jointly and severally, from any and all costs, expenses, damages, and losses of any kind arising from any injury, illness, or other harm sustained while participating in such activities.

Authorization to provide emergency medical service: If skater is a minor and will not be accompanied by a parent or guardian, the parent or guardian must grant permission to provide necessary emergency medical service in the event of injury or illness of the skater.

I give permission for \_\_\_\_\_ to receive emergency medical care by qualified medical personnel if necessary. \_\_\_\_\_  
Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

**Please send, email, or personally submit these forms completed with your practice session registration form. This form is for our records for waiver. You will be receiving your competition schedule and practice schedule through email.**