

# GBURG SKATE FEST



Gaithersburg  
A CHARACTER COUNTS! CITY

## Spring 2014

**Saturday, May 10**

**11am - 3pm**

**Gaithersburg Skate Park**

**510 S Frederick Ave**

**Gaithersburg, MD 20877**

**\$8/\$10 entry**

**(residents/nonresidents)**

**Spectators FREE**

**Beginner Skateboard**

**Advanced Skateboard**

**\*\*ALL competitors must have a valid registration form signed  
Competitors may only enter one event.  
Each participant will have two 2-minute runs.**



**Prizes Donated By Roll & DC101**



**roll skate shop**

- ◇ **Contestant prizes for Advanced Level: 1st Place (\$100), 2nd Place (\$50), 3rd Place (\$25). Prizes donated by local skate shops will also be awarded for Beginner Level.**
- ◇ **Additional Prize Drawings - A chance to win DVDs, CDs and more choice items donated by DC101**

Questions? Call the Gaithersburg Skate Park at 301-258-6359 or Rachel Tailby at 301-258-6350 x144 or email [skatepark@gaitersburgmd.gov](mailto:skatepark@gaitersburgmd.gov)



# GAITHERSBURG SKATE PARK COMPETITION REGISTRATION

## Schedule of Events, May 10

<b>11:00 - Noon</b>	<b>Free Skate and Registration</b>
<b>Noon</b>	<b>Beginner Skateboard</b>
<b>1:00pm</b>	<b>Advanced Warm-up</b>
<b>2:00 pm</b>	<b>Advanced Skateboard</b>
<b>3:00 pm</b>	<b>Prize Drawing!!</b>

- **\$8 entry fee for residents/\$10 entry fee for nonresidents**
- **The above schedule is subject to change**
- **Contestants will be judged on style, consistency and technical presentation.**
- **Prizes will be awarded at the end of each event.**

<input type="checkbox"/> Beginner Skateboard		<input type="checkbox"/> Advanced Skateboard	
First Name _____	Last Name _____		
Address _____	City/State/Zip _____		
Home phone _____	Cell phone _____		
Email _____			

I know, understand, and acknowledge that there are risks associated with the use of City buildings/equipment/personal property and here by assume any and all risks and hazards associated therewith, and shall be solely responsible for safe and reasonable use.

I hereby irrevocably waive any and all claims against the City of Gaithersburg or any of its officials, employees, or agents for any bodily injury (including death), loss or property damage incurred as a result of using the buildings/equipment/personal property and hereby irrevocably release and discharge the City and any of its officials, employees, or agents from any and all claims of liability arising out of or associated with the use of the buildings/equipment/personal property.

I shall indemnify and hold harmless the City and its officials, employees, and agents from and against any and all liabilities, judgments, settlements, losses, costs, or charges (including attorney's fees) incurred by the City or any of its officials, employees or agents as a result of any claim, demand, action, or suit relating to any bodily injury (including death), loss or property damage caused by, arising out of, related to or associated with the use of the buildings/equipment/personal property by its members, employees, agents, or invitees. I also consent to the City's use of any photographs taken or video tapes made of the program.

\_\_\_\_\_ **Print Parent/Guardian Name**

\_\_\_\_\_ **Signature of Parent/Guardian**

Does your child have any allergies, medications or conditions that may affect participation in the program? Y  N  **Please specify:**

Amount Paid \$ _____	Cash <input type="checkbox"/> Check # _____	<b>Office Use Only: #</b> Rec'd: _____ Initials _____ W P M F Resident: Y N Pr: _____ Date: _____
Visa/MC# _____	Exp. Date ___/___	
Signature (name on card) _____		
Print Name _____		