



Southland Center, A Ho-Chunk Enterprise  
 10 Southland Dr.  
 Lynwood, IL 60411  
 708-418-5554

As consideration for being allowed to enter the Southland Center and/or participate in any party and/or program at the Southland Center, the undersigned, on his or her behalf, and on the behalf of the Participant (s) identified below, acknowledges, appreciates, understands, and agrees to the following:

1. I represent that I am the parent or legal guardian of the Participant(s) named below:

---

Participant Name	Date of Birth
------------------	---------------

---

Participant Name	Date of Birth
------------------	---------------

---

Participant Name	Date of Birth
------------------	---------------

2. I acknowledge and understand that there are risks associated with participation in Southland Center activities and the use of the facility including but not limited to: contusions, fractures, scrapes, cuts, bumps, paralysis, or death.
3. I, for myself and the Participant(s) named, willingly assume the risks associated with participation and accept that there are also risks that may arise due to OTHER PARTICIPANTS, which I also willingly assume.
4. I agree that the Participant (s) named and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any activity at the Southland Center.
5. I, for myself and the Participant (s) named, our heirs, assigns, representatives, and next of kin agree to hold harmless and indemnify the Southland Center, Indoor Sports Management Group, Ho-Chunk Nation, their predecessors, parent, subsidiaries and affiliates, officers, and employees from any and all injuries, liabilities, or damages from participation.
6. I additionally agree to indemnify the Southland Center, Indoor Sports Management Group, Ho-Chunk Nation, their predecessors, parent, subsidiaries, and affiliates, officers, and employees for any defense cost or expense arising from any and all claims, injuries, liabilities, or damages arising from participation.
7. In exchange for my use of the Southland Center facilities, I further consent to a pat down and/or 'wand' search of my person and my personal belongings that accompany me onto the Southland Center property upon entrance to the Southland Center or upon reasonable suspicion of illegal contraband while on the Southland Center property.
8. I am of physical ability to participate and legally competent to understand and complete this agreement. I hereby execute this agreement without coercion.

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Participant signature: \_\_\_\_\_

Emergency Contact Number: (\_\_\_\_\_) \_\_\_\_\_ or (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_