RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

In consideration of being permitted to participate in any way in on-ice and/or hockey event activities during the 2017-18 ECHL hockey season ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

- 1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
- 2. FULLY UNDERSTAND THAT: (a) the Activity INVOLVES RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these RISKS and dangers may be caused by my own actions or inactions or the actions or inactions of others participating in, supervising, aiding in, or otherwise taking part in the Activity, the condition in which the Activity takes place, or the negligence of the RELEASEES named below; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES INCLUDING, BUT NOT LIMITED TO, ATTORNEYS' FEES AND COSTS, I incur as a result of my participation or that of the minor in the Activity.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT:

| (Street) | (City) | (State/Province) | (Zip) |
|---|--|--|--|
| PHONE: | | | |
| PARTICIPANT'S SIGNATURE (only if age 18 or over): | | | |
| DATE: | | | |
| AND I, THE MINOR'S PARENT AND/OR LEGAL GUARI MINOR'S EXPERIENCE AND CAPABILITIES AND BELL PROPER PHYSICAL CONDITION TO PARTICIPATE IN NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAG COSTS, ON THE MINOR'S ACCOUNT CAUSED OR NEGLIGENCE OF THE RELEASEES OR OTHERWISE, AGREE IF, DESPITE THIS RELEASE. I, THE MINOR, OF ANY OF THE RELEASEES NAMED ABOVE, I WILL INDE FROM ANY LITIGATION EXPENSES, ATTORNEYS' FEE MAY INCUR AS THE RESULT OF ANY SUCH CLAIM. | ELEVE THE MINOR TO IN SUCH ACTIVITY. I HE VE AND HOLD HARMLE AGES INCLUDING, BUT R ALLEGED TO BE C E, INCLUDING NEGLIGE | BE QUALIFIED, IN GOOD HI REBY RELEASE, DISCHARG SS EACH OF THE RELEASE NOT LIMITED TO, ATTORNE AUSED IN WHOLE OR IN NT RESCUE OPERATIONS NOR'S BEHALF MAKES A C DLD HARMLESS EACH OF TH | EALTH, AND GE, COVENA EES FROM A LYS' FEES AI PART BY TI AND FURTHI CLAIM AGAIN HE RELEASE THE RELEASE |
| ANY OF THE RELEASEES NAMED ABOVE, I WILL IN FROM ANY LITIGATION EXPENSES, ATTORNEYS' FI | | | |
| ANY OF THE RELEASEES NAMED ABOVE, I WILL IN FROM ANY LITIGATION EXPENSES, ATTORNEYS' FI | EES, LOSS, LIABILITY, D | AMAGE, OR COST ANY OF | THE RELEASE |

DATE: _____