

FLYERS SKATE ZONE

ASSUMPTION OF RISK AND RELEASE

BY MY PARTICIPATION IN THE ON-ICE ACTIVITIES BEING HELD ON THE DATE SET FORTH BELOW AT FLYERS SKATE ZONE _____, I VOLUNTARILY AND KNOWINGLY ASSUME ALL RISK OF PERSONAL INJURY AND ALL OTHER HAZARDS FROM OR RELATED TO SUCH PARTICIPATION, WHETHER OCCURRING PRIOR TO, DURING, OR AFTER SUCH ACTIVITY, AND HEREBY FOREVER RELEASE AND DISCHARGE FPS RINK,L.P., FPS RINK, INC. AND THEIR RESPECTIVE AFFILIATES, OWNERS, OFFICERS, DIRECTORS, EMPLOYEES AND AGENTS OF AND FROM ANY AND ALL MANNER OF ACTIONS, CAUSES OF ACTIONS, CLAIMS OR DEMANDS OF ANY KIND OR NATURE, EITHER IN LAW OR AT EQUITY, WHATSOEVER RELATING IN ANY WAY TO MY PARTIPATION IN SUCH ACTIVITIES, INCLUDING BUT NOT LIMITED TO CLAIMS FOR BODILY INJURY OR DEATH OF PERSONS AND LOSS OR DAMAGE TO PROPERTY, WHETHER OR NOT CAUSED BY NEGLIGENCE.

I FURTHER RELEASE ALL OFFICIALS AND PERSONNEL FROM ANY AND ALL CLAIMS WHATSOEVER ON ACCOUNT OF FIRST AID, TREATMENT OR SERVICE RENDERED ME DURING MY PARTICIPATION IN SUCH ACTIVITIES.

I FURTHER STATE THAT I HAVE CAREFULLY READ THIS ASSUMPTION OF RISK AND RELEASE AND KNOW THE CONTENTS AND SIGN THIS ASSUMPTION OF RISK AND REALEASE AS MY OWN FREE ACT.

SIGNATURE*: _____

PRINT NAME: _____

ADDRESS: _____

DATE OF SIGNATURE: _____

DATE OF ACTIVITY: _____

*If participant is a minor (under the age of 18), parent or guardian must also sign below

I REPRESENT THAT I AM THE PARENT/GUARDIAN OF THE MINOR WHO HAS SIGNED THE ABOVE ASSUMPTION OF RISK AND RELEASE, AND I HEREBY AGREE THAT WE SHALL BOTH BE BOUND THEREBY.