

NAME: _____ PHONE: _____
 ADDRESS: _____ BIRTHDATE: _____
 CITY, STATE, ZIP: _____ EMERGENCY CONTACT #: _____
 EMAIL ADDRESS: _____

**ICE SKATING RINK
 PARTICIPANT
 -READ BEFORE SIGNING-**

In consideration of being allowed to participate in any way in the recreation program, related events and activities of Lakeland Arenas, I _____, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and, personal discipline may reduce this risk, the risk of serious injury does exist, and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown of my participating in recreational skating, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation, and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation in ice skating and/or hockey. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I for myself and on behalf of my heir, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMINFY, AND HOLD HARMELSS THE CMR Enterprises Inc, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURTY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. Arbitration: In further consideration of allowing me to participate in the aforementioned activities, I hereby agree to submit to binding arbitration any and all claims which I believe I may have against the facility arising from my activities at the facility. The arbitration shall apply the Federal Rules of Evidence to all proceedings. Arbitration shall be commenced within one (1) year from the date on which any alleged claim first arose. Further, the arbitration shall be held in the town where the arena is located, unless otherwise mutually agreed by all parties. The submission to the American Arbitration Association shall be unlimited and the arbitration award may be enforced by any court of competent jurisdiction.

I HAVE READ THE RELEASE OF LIBABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____ Date Signed _____ Age _____
Participants' Signature

FOR PARENTS / GUARDIANS OF PARTICIPANTS OF MINORITY AGE
 (Under age 18 at time of registration)

This is to certify that I, as a parent/guardian with legal responsibility for this participant; do consent and agree to his/her release as provided above all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X _____ Date Signed _____
Parent / Guardian Signature

Emergency Phone Number(s) _____
