

**NOTE: this document MUST be signed by each player and remitted at the reception prior to stepping on the ice. Thanks.**

**PARTICIPATION AGREEMENT, RELEASE OF LIABILITY,  
WAIVER OF CLAIMS AND ASSUMPTION OF RISK**

**BY SIGNING THIS DOCUMENT YOU MAY BE WAIVING  
CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE**

**ASSUMPTION OF RISK:** In consideration for the Dr Pepper StarCenter (the "Arena") granting me permission to visit and/or participate in ice skating activities including, but not limited to, hockey, curling, broomball and figure skating, and in acknowledgement that these activities involve certain inherent risks, dangers and hazards, which can result in serious personal injury or death, and that ice arenas contain potential dangers to the public using these arenas, I hereby freely agree to assume and accept any and all known and unknown risks of the injury while participating in activities on ice at the Arena.

**RELEASE AND WAIVER OF CLAIMS AGREEMENT:** In consideration of allowing me to participate in activities on ice in the Arena, I hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against any Dr Pepper StarCenter (the "Arena"), Hicks, Inc., Southwest Sports Group Holdings LLC, Southwest Sports Group LLC, SSG Partnership Holdings LLC, Dallas Stars, L.P., Plano StarCenter LLC, Duncanville StarCenter LLC, Dallas/Ft. Worth Curling Club (the "Club/League") and all of their respective employees, officers, partners, directors, shareholders or affiliates and the league (if applicable), resulting from my activities at the Arena;
2. TO RELEASE THE ARENA, HICKS, INC., SOUTHWEST SPORTS GROUP HOLDINGS LLC, SOUTHWEST SPORTS GROUP LLC, SSG PARTNERSHIP HOLDINGS LLC, DALLAS STARS, L.P., PLANO STARCENTER LLC, DUNCANVILLE STARCENTER LLC, DALLAS/FT. WORTH CURLING CLUB AND ALL OF THEIR RESPECTIVE EMPLOYEES, OFFICERS, PARTNERS, DIRECTORS, SHAREHOLDERS OR AFFILIATES AND THE LEAGUE (IF APPLICABLE), FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY OR EXPENSE THAT I MAY SUFFER, OR THAT MY NEXT OF KIN MAY SUFFER, AS A RESULT OF MY PARTICIPATION IN ANY ACTIVITY AT THE ARENA, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE OR BREACH OF CONTRACT ON THE PART OF THE ARENA AND/OR LEAGUE/CLUB IN THE OPERATION, SUPERVISION, DESIGN, OR MAINTENANCE OF THE AREANA;
3. **ARBITRATION:** In further, consideration of allowing me to participate in the activities on the ice in the Arena, I hereby agree to submit to binding arbitration any and all claims which I believe that I may have against the Arena and any and all parties named in the aforesaid release and waiver arising from my activities at the Arena. The arbitration shall be pursuant to the rules of the American Arbitration Association. 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 to by all the parties. The submission to the American Arbitration Association shall be unlimited and any court of competent jurisdiction may enforce the arbitration award.

**BINDING EFFECT OF AGREEMENT:** In the event of my death or incapacity, this Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives.

**ENTIRE AGREEMENT:** In entering into this Agreement, I am not relying upon any oral or written representations other than what is set forth in this Agreement.

**I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE THE ARENA, CLUB/LEAGUE OR ANY PARTIES MENTIONED IN THE AFORESAID WAIVER OR RELEASE.**

_____ Signature of Participant	_____ Signature of Parent/Legal Guardian if participant is Minor
_____ Date	_____ Date

<b>PARTICIPANT:</b>	
LAST NAME:	FIRST NAME:
ADDRESS:	
CITY:	STATE/ZIP CODE
TELEPHONE:	EMAIL:

Arena: Duncanville