ADULT PARTICIPANT RELEASE

Assumption of Liability, Waiver and Release

I understand that (a) the sport of curling is played on ice and requires physical fitness, and (b) I may be in close proximity to others with a risk that I could be exposed to communicable disease while on and about the ice or other areas of the Lake Placid Curling Club Curling Facility, and (c) there is a risk that I could suffer serious illness, injury or death as a result of participating in curling or related activity. I represent and agree that I possess the necessary physical fitness, and I understand and assume all risks associated with participating in curling and related activity in or about the premises owned/leased and operated by the Lake Placid Curling Club located at 213 Ampersand Avenue, Saranac Lake, New York.

In consideration of being allowed to participant in curling or other activity or programs at the Lake Placid Curling Club Curling Facility, I, for myself and my estate, successors, assigns, heirs, beneficiaries, administrators, executors, trustees, and representatives do waive, and release and forever discharge (i) Lake Placid Curling Club, (ii) Grand National Curling Association ("GNCC"), (iii) the United States Curling Association ("USCA"), (iv) the respective successors and assigns of each of Lake Placid Curling Club, GNCC and USCA, (v) the respective employees, officers and directors of each of Lake Placid Curling Club , GNCC and USCA, but only while acting in their capacity as such, and (vi) individuals providing curling instruction or training at the Lake Placid Curling Club Curling Facility from any and all actions, suits, causes of action, claims, demands, damages, judgments, expenses and liabilities, including without limitation attorneys fees and expenses of litigation, for illness, personal injury, death or property damage arising from or related to my participation in curling or other activity or programs in or about the Lake Placid Curling Club Curling Facility, or otherwise conducted by the Lake Placid Curling Club, prior to the Expiration Date. "Expiration Date" means the date which is one (1) calendar year after the date this Release is signed.

I certify that I am at least eighteen (18) years of age and have the legal capacity to sign this Release on my own behalf.

Communicable Disease Requirements

I agree to strictly follow all rules and procedures from time to time established by the Lake Placid Curling Club to reduce the risk of exposure to communicable diseases. I also understand that there is no guarantee that rules or procedures adapted and applied by the Lake Placid Curling Club in an effort to reduce the risk of exposure to COVID-19 and other communicable diseases will fully protect me against the transmission of such diseases.

I HAVE READ THIS ASSUMPTION OF LIABILITY, WAIVER AND RELEASE. I UNDERSTAND THAT I GIVE UP LEGAL RIGHTS BY SIGNING THIS DOCUMENT.

Signature: _____

Date:_____

Printed Name: _____