

EXHIBIT "A"

Participation, Waiver and Release Agreement

Please read carefully before signing. This is a Release of Liability

In consideration for my being permitted to use the Kodiak Ski Lake, and/or its facilities, I agree to the following waiver and release:

I hereby accept and assume the risk of skating on Kodiak Ski Lake, including, but not limited to, the design of the Lake, the frozen pond, and the condition, as they exist.

(Please initial above)

I understand that there are significant, unavoidable, and inherent dangers and risks involved in ice skating and playing ice hockey. I acknowledge that these dangers and risks include, without limitation, the possibility of injury or death from the sport of ice skating, as well as injuries from the use of Kodiak Ski Lake, and all other risks and dangers that are integral to the sport of ice skating.

(Please initial above)

I am aware and acknowledge that ice skating has inherent dangers and risks for any ice skater. I am voluntarily participating in ice skating on Kodiak Ski Lake, with full knowledge of the dangers and risks involved, and hereby agree to accept any and all risks of injuries, paralysis or death, which may result.

(Please initial above)

Lastly, I for myself, my heirs, successors and executors, hereby knowingly and intentionally waive and release, indemnify, defend and hold harmless Kodiak Ski Lake, LLC, individually, from and against any and all claims, actions, causes of action, liabilities, suits, expenses (including reasonable attorney's fees), and negligence of any kind of nature, whether foreseen or unforeseen, arising directly or indirectly out of any damage, loss, injury, paralysis, or death to me or my property as a result of my skating on Kodiak Ski Lake, and for the use of the facilities, or my child's presence at Kodiak Ski lake, whether such damage, loss, injury, paralysis or death results from the negligence of Kodiak Ski Lake, LLC, or from some other cause.

(Please initial above)

I have carefully read, clearly understand, and voluntarily sign this Participation, Waiver and Release Agreement.

Witness

Signature

Date

Print Name