

HOLD-HARMLESS AGREEMENT

IMPORTANT: READ BEFORE SIGNING

AGREEMENT AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way with the Annual Bad Medicine Lake Ice Carousel 2020, and related events and activities (hereafter referred to as "Sports") sponsored by Jay and Valentina Smukowski J.S.S. Trucking, Inc. and held at Veronen's Resort, LLP on Bad Medicine Lake, Ponsford, Minnesota 56575,

I, _____ (Name of Participant):

1. Agree that prior to participating in any Sports, I will inspect the facilities and equipment to be used, and if I believe anything is unsafe, I will immediately advise Jay and Valentina Smukowski J.S.S. Trucking, Inc. and Veronen's Resort, LLP, of such condition(s) and refuse to participate.
2. Understand that any Sports involves inherent risks, that certain dangers exist and hazards may occur, including but not limited to, the risks traveling and moving in hazardous terrain, negligence on my part or on the part of another person, the rules of play, accidents, physical injury/death, illness in remote areas without medical facilities, the condition of the premises or of any equipment used and the forces of nature. Further, that there may be other risks not known or not reasonably foreseeable at this time.
3. Agree that I and my heirs will hold Veronen's Resort, LLP; Jay and Valentina Smukowski J.S.S. Trucking, Inc., or any agent or individual acting on behalf of them, harmless and indemnify, release and covenant not to sue Veronen's Resort, LLP and any agent or individual of Veronen's Resort, LLP; Jay and Valentina Smukowski J.S.S. Trucking, Inc., for injury, death, damage to property Veronen's Resort, LLP; Jay and Valentina Smukowski J.S.S. Trucking, Inc. or personal loss, whether caused by my own negligence, the negligence of someone else and/or the negligence of Veronen's Resort, LLP; Jay and Valentina Smukowski J.S.S. Trucking, Inc. or anyone acting on behalf of Veronen's Resort, LLP; Jay and Valentina Smukowski J.S.S. Trucking, Inc.

I HAVE READ THIS AGREEMENT CAREFULLY. I FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY AND A SIGN THIS OF MY OWN FREE WILL.

Date: _____

Print Name of Participant: _____

Signature of Participant: _____

Parent's signature if under 18 years old: _____

List of Family Members under age of 18 years old: _____

