PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Sugar Loaf Ski Corp, Eagle Rock Resort Club Corp, Double Diamond-Delaware, Inc., their agents, owners, officers, volunteers, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "SLSC"), I hereby agree to release, indemnify, and discharge SLSC, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in Skiing, Snowboarding Training and Instruction and Tubing Activities entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: slips and falls; hidden obstacles by snow, ice and snow cornices, tree wells, tree stumps, creeks rocks and boulders, below the snow surface; loss of control loss or damage to equipment being used; collision with other people, equipment, manmade or natural obstacles, or fixed or movable objects; traveling in forested areas, rugged terrain, or inclement weather; exposure to elements, altitude, and cold including hypothermia, frostbite, acute mountain sickness, exhaustion, cerebral and pulmonary edema; sunburn, dehydration; exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; sprains, strains, scratches, bruises, abrasions, cuts, lacerations, broken bones, fractures, musculoskeletal injuries including head, neck, and back injuries; wrist, arm, or shoulder injuries; steepness of slopes, snow depth, instability of snow pack or varying and difficult weather; riding on uneven snow covered terrain, changing snow conditions and variations in elevations; exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; equipment failure and/or operator error; unavailability of immediate medical attention in case of injury; accidents or illness can occur in remote places without medical facilities; transmissible pathogen or diseases; my own physical condition, and the physical exertion associated with this activity.

Furthermore, SLSC personnel have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless SLSC from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of SLSC's equipment or facilities, including any such claims which allege negligent acts or omissions of SLSC.
- 4. Should SLSC or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
- 6. In the event that I file a lawsuit against SLSC, I agree to do so solely in the state of Pennsylvania, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against SLSC on the basis of any claim from which I have released them herein. I also agree that this document is valid for subsequent visits and participation at SLSC. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Name	Phone Number City_		
Address			
State	Zip	Email	
Signature of Participant			Date
In consideration of the follo	(Must be con	VARDIAN'S ADDITIONAL INDEX inpleted for participants under the atme(s) and DOB(s))	
• .	nd all claims which are		Cacilities, I further agree to indemnify and hold and which are in any way connected with such
Parent or Guardian:		Print Name:	Date: