

WAIVER

If you will be at the Dallas Market Hall for any of the Lone Star State Classic Dog Shows, December 2 through 6, 2020, in any capacity, you must complete prior to admittance and bring it with you to gain entry and obtain your entry wristband that you MUST wear each day and show upon entering the facility.

THIS INCLUDES EXHIBITORS, OWNERS, HANDLERS, BREEDERS, ASSISTANTS, FAMILY, GUESTS, SUPERINTENDENTS, JUDGES, STEWARDS, VENDORS, ANY PROVIDERS OF SERVICES AND THEIR STAFF, AND VOLUNTEERS. THERE ARE NO EXCLUSIONS OR EXCEPTIONS.

I am fully aware of the risks involved in the potential spread of COVID-19 that could result in severe illness and potential death. My presence at the Lone Star State Classic (herein, the "LSSC") proves that I accept this risk and that I hereby agree to indemnify and hold Dallas Market Hall (herein, the "DMH") and the LSSC, and any of the event-giving clubs their respective affiliates and each of the foregoing's respective administrators, members, officers, directors, employees, volunteers, sponsors, vendors, contractors, medical services providers, judges, superintendents, and agents, (the "Releasees") from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, illness, or injury, including death, that may be sustained by me or by others who come into contact with me, whether caused by the negligence of the Releasees, other entities or individuals, or otherwise as a result of, or related to, my decision to enter DMH. I am entering into this Waiver knowingly and on my own behalf.

I will, to the best of my ability, practice social distancing as recommended by the State of Texas "Open Texas" directives, as well as practice good hygiene (hand washing, use of hand sanitizer, wearing of a mask if and when required, etc.) and follow health recommendations issued by the Texas Department of State Health Services and Centers for Disease Control and Prevention.

I will wear a face mask at all times. I will not gather in groups closer than 6 feet and will practice social distancing within DMH and on its grounds and parking areas.

I UNDERSTAND THIS IS A RELEASE OF LIABILITY AND AGREE THAT IT IS VALID FOREVER. It is my express intent that this Waiver binds; (i) the members of my family and spouse, if I am alive, and (ii) my heirs, assigns and personal representatives, if I am deceased. I understand that this Waiver does not apply to any claim that, as a matter of law, cannot be released by private agreement.

I agree that this Waiver shall be construed in accordance with the laws of the State of Texas without giving effect to any laws, rules or provisions that would cause the application of laws of any jurisdiction other than those of the State of Texas.

Sign Name: _____ City/State: _____

Email: _____

Print Name: _____ Date: _____

Cell Phone: _____

FOR USE BY PARENT OR GUARDIAN OF MINOR: I represent that I am a parent (or guardian) of the minor who has signed this Waiver. I have read this Waiver and hereby agree irrevocably that I and said minor will be bound by all the provisions **contained herein.**

Sign Name: _____ Date: _____

Print Name: _____

Email: _____