

Party Group's Name



Waiver of Liability

In consideration for participation in all activities at **Jumping Jax, LLC** facility, I hereby agree to the following:

I understand that participation in the amusement rides and games owned and operated by **Jumping Jax, a Greenwood Limited Liability Company**, is risky, and that the risks of injury include, without limitation, scrapes, bruises, cuts, and even more serious injuries, such as paralysis or death, and I fully accept and agree to assume all of these risks (including risks arising from the negligence of other participants), for myself, my child or my ward.

I acknowledge and understand that the operator(s) have advised me of the proper use and possible hazards of participating in the activities at **Jumping Jax, LLC**. I acknowledge that I am solely responsible for the decision to allow myself, my child or my ward to participate in the activities at **Jumping Jax, LLC**. With full understanding of the risks stated above, I, for myself, my child or my ward, hereby release, and hold harmless **Jumping Jax, LLC** and the owners, officers, directors, and managers of such entities, and their heirs, successors and assigns, in connection with the participation of myself, my child or my ward in activities at **Jumping Jax, LLC**.

I, for myself, my child, or my ward, agree to follow all the safety rules of **Jumping Jax, LLC**, and agree that the failure of myself, my child, or my ward to do so may result in expulsion from premises. I also approve the use of any photographs taken by **Jumping Jax, LLC** photographers in which the undersigned is part of to be used on the **Jumping Jax, LLC** website or printed media.

I HEREBY RELEASE, WAIVE, AND GIVE UP ANY AND ALL CLAIMS, KNOWN AND UNKNOWN, THAT MYSELF, MY CHILD, OR MY WARD MAY NOW OR LATER HAVE AGAINST **Jumping Jax, LLC**, ITS MEMBER(S), OFFICER(S), INSTRUCTOR(S), OPERATOR(S), AGENT(S), OR REPRESENTATIVES RELATED TO ANY ACT, OMISSION, STATEMENT, OR OCCURRENCE DURING OR RELATED TO THE ACTIVITIES AT **Jumping Jax, LLC**. CLAIMS FOREVER RELEASE BY MYSELF, MY CHILD, OR MY WARD INCLUDE, WITHOUT LIMITATION, LIABILITY FOR DIRECT, INDIRECT, VICARIOUS, CONSEQUENTIAL, AND INCIDENTAL, PERSONAL INJURY, DEATH, ECONOMIC LOSS AND OTHER DAMAGE OF EVERY KIND WHEREVER OR HOWEVER IT MAY OCCUR.

By signing this form, I agree and understand that this agreement is binding on myself, my child, or my ward, and the heirs, successors and assigns of myself, my child, or my ward. I certify that I am of legal age and mental competence and that I am the legal parent or guardian of the child for whom I am signing or, if I am not the parent or legal guardian of the child, that I have the express permission of the child's legal parent or guardian.

*** Required Information! Please provide first & last names for anyone playing. If you have more than one child playing, you may list them on the same page. If parents will be playing or assisting smaller children while playing, their name must be listed as a child's name and their signature is required!**

* Child's Name _____

* Date of Birth _____

* Child's Name _____

* Date of Birth _____

Child's Name _____

Date of Birth _____

Child's Name _____

Date of Birth _____

Child's Name _____

Date of Birth _____

* Contact Phone # _____

* Today's Date _____

* Email Address

* Printed Name of Parent or Legal Guardian

* Signature of Parent(s) Playing

* Signature of Parent or Legal Guardian