



## ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY

**\*\*Please READ before signing\*\***

I, \_\_\_\_\_, of \_\_\_\_\_,  
(Parent/Legal Guardian) (Parents Street Address)  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, certify that I am the parent/legal guardian  
(City) (State) (Zip)

of the participant(s) listed below, or have obtained permission from the parent/legal guardian of the participant(s) listed below to execute this agreement on their behalf. I acknowledge that the participant(s) listed and I agree to comply with all stated rules and verbal instructions as conditions for participation in any and all fitness programs or activities, group events, and/or the use of the fitness facility, fitness equipments and inflatable equipments at Paradise of Fun.

I am aware that participation in Paradise of Fun fitness programs or activities, group events along with the use of fitness and inflatable equipments may have associated risks of injury including but not limited to permanent paralysis or death. I, on behalf of myself and the participant(s) listed below, assume all such risks, both known and unknown, including those that may be the result of the negligence of other participants.

I, on behalf of myself and the participant(s) listed above along with any persons related to myself or the participant(s) listed, hereby release and hold harmless, Paradise of Fun, its officers, employees, agents, affiliates, or other participants from and against any claims, injuries, liabilities, or damages that may arise out of or related to our participation in any and all Paradise of Fun fitness programs or activities, group events along with the use of fitness and inflatable equipments, and/or the use of the fitness facility.

I, on the behalf of myself and the participant(s) listed below, agree to report any and all injuries sustained on the Paradise of Fun premises to management before leaving said premises. Should it be necessary, in the opinion of a member of the staff at Paradise of Fun to administer first aid to the participant(s) listed below, I hereby grant permission to do so if I am not present. I have read and understand this acknowledgement of risk and waiver of liability, assumption of risk and indemnity agreement, understand that I have given up substantial rights by signing it voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

I, on the behalf of myself and the participant(s) listed below, give permission to be photographed while participating in any activity or function with Paradise of Fun. Photographs taken will be for the use of Paradise of Fun as advertising. Subject of photographs taken and used in any advertisement will not be compensated for the use of the photographs.

**SAFETY RULES & TRAINING-** All applies once you pass thru the doors.

- No Shoes-**SOCKS** Required\*
- No Food, Gum or Drinks
- No Sharp Objects or Toys
- No Jewelry or Eyeglasses
- No Flips, Wrestling or rough play
- No bouncing closer than 4 feet to others
- No bouncing near doorway
- No hanging on walls or roof of air bounces
- No silly string is allowed near air bounces
- Go down slides feet first at all times
- No riders allowed on air bounces while inflating or deflating
- If air bounces start to deflate for any reason evacuate immediately
- Inflatable must be anchored at all times
- Parents please observe and supervise your children at all times
- Anyone not following safety rules will be asked to leave

\_\_\_\_\_  
Participant Name Date of Birth Participant Name Date of Birth

\_\_\_\_\_  
Participant Name Date of Birth Participant Name Date of Birth

\_\_\_\_\_  
Participant Name Date of Birth Participant Name Date of Birth

\_\_\_\_\_  
Parent/Guardian Name Date

**EMAIL:** \_\_\_\_\_