



## WAIVER OF LIABILITY

In consideration of being permitted to engage in the following activity - Attempting to escape from a locked room with a group of people, which may include, but is not limited to, crouching, kneeling, climbing, crawling, use of simple tools and lifting objects less than 20 pounds. (hereinafter referred to as the "Activity") coordinated by Beat The Box LLC which I acknowledge is unsupervised, I and/or my child acknowledge and agree to the below, on my own behalf, and on behalf of my personal representatives, heirs, assigns, executors, administrators and next of kin, as follows:

### Acknowledgements

I have no physical or mental illness that precludes my participation in a safe manner for myself or others. I am not under the influence of drugs or alcohol which impairs my ability to maintain my safety awareness or endangers others. I acknowledge that this Accident Waiver and Release of Liability Form will be used by the organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity. I agree that all staff or authorized agents may, in their sole discretion, determine it is unsafe for myself or others for my participation to continue, remove me from the premises by any lawful means.

**ASSUMPTION OF RISK:** I am aware and acknowledge that injury, mental stress and/or anxiety, or death may result from my participation in the Activity and from the use of the premises and facilities where the Activity is located or is to occur, or if premises and facilities are not an applicable description, the general area where the Activity is to occur, and the use of any machinery, equipment or apparatus located therein or thereon (collectively the "Activity Premises").

Upon entering the Activity Premises, I will inspect the same and my observation and my engagement, participation and/or involvement in the Activity shall constitute an acknowledgement that I find and accept them to be safe and reasonably suited for their intended purpose.

I hereby release Beat The Box LLC and (collectively, the "Releasees") from and against any and all liability for any loss, damage, injury, expense, demand or cause of action that I may suffer whether with respect to personal injury, death, damage to or destruction of property, theft or otherwise, which may arise as a result of my presence in, upon or about the Activity Premises or my use of the Activity Premises.

**I will indemnify and hold harmless the Releasees, collectively and individually, from any and all losses, liabilities, damages, demands, costs, causes of action and expenses that they may incur, for any reason whatsoever, which may arise as a result of my participation in the Activity, and my presence in, upon or about the Activity Premises.**

**I acknowledge that the directors, officers, employees, volunteers, representatives, and agents of this authorizing entity are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity. The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.**

**I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose this authorizing entity decides, and assigns. I will be monitored and recorded by video camera and may be photographed after participating in the activity. I hereby consent to give Beat The Box LLC, permission to allow my photograph to be displayed, published or distributed.**

**I understand that being permitted to participate in the above noted activity, there are potential risks including but not limited to:1) Being enclosed in a small room with a group of people. 2) Mental stress and similar disorders. 3) The use of simple tools and objects. 4) Dim lighting in rooms. I acknowledge that I am not permitted to take photos while participating in the activity described above.**

**I ACKNOWLEDGE THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND Beat The Box LLC, AND SIGN IT OF MY OWN FREE WILL. I acknowledge that I am at least 18 years old. If the participant is under 18 years old, a Parent/Guardian must sign this waiver on their behalf and all of the above apply to the minor.**

\_\_\_\_\_  
Legal name of participant :

\_\_\_\_\_  
Age:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Name of guardian if under 18 :

\_\_\_\_\_  
Age:

\_\_\_\_\_  
Signature of Guardian: