



## RELEASE OF LIABILITY, INDEMNITY AND ASSUMPTION OF RISK

**IN CONSIDERATION of being permitted to participate in any Game Gallery activities including, but not limited to, playing and operating gaming equipment and using the premises, I acknowledge and agree that:**

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify Game Gallery and its owners, agents, officers and employees from any and all claims, actions or losses for bodily injury, property damage (including, but not limited to, arising out of the actual or alleged transmission of a communicable disease), wrongful death, loss of services or otherwise which may arise out of my child(ren)'s use of gaming equipment or participation in gaming activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers or employees of Game Gallery. I understand that my child(ren)'s photograph, and or video may be taken while on premises by Game Gallery employees or others. I grant permission for my child's likeness and image to be used in whole or in part by Game Gallery and its agents without any claims for liability, libel, or compensation.

### **MEDICAL PERMISSION AUTHORIZATION**

I, the undersigned parent or guardian hereby gives permission for Game Gallery to authorize emergency medical treatment as may be deemed necessary for the child(ren) named below while participating in the Game Gallery Camps.

**I HAVE READ THE ABOVE WAIVER AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE GAME GALLERY FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.**

Print Name of Parent or Guardian: \_\_\_\_\_

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

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**PLEASE PRINT CLEARLY:**

Name of Camper: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Camper: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Camper: \_\_\_\_\_ Age: \_\_\_\_\_

Any Food Allergies? \_\_\_\_\_

List anyone else permitted to pick up your child: \_\_\_\_\_

Phone Number: \_\_\_\_\_