

# GAME BOYZ EXP. – LIABILITY WAIVER & RELEASE FORM

Mobile Video Gaming Service - Northwest Arkansas

Date: June 09, 2025

Participant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

## ***1. Acknowledgment of Risk***

I understand and acknowledge that participating in activities involving video games and the mobile gaming environment provided by Game Boyz Exp. involves certain inherent risks, including but not limited to: - Physical injuries due to motion, excitement, or unexpected movements - Eye strain, headaches, or fatigue - Mental or emotional stress or overstimulation - Exposure to loud sounds or flashing lights I voluntarily assume full responsibility for any and all risks, injuries, or damages, known or unknown, which might arise from participation in such activities.

## ***2. Release and Waiver***

In consideration of being permitted to participate in Game Boyz Exp. events or services, I hereby release, waive, discharge, and hold harmless the Company from any and all claims, liabilities, damages, or losses (including attorney fees) arising out of or related to any injury, illness, loss, or damage sustained while participating in any Game Boyz Exp. activity. This release includes, but is not limited to, claims based on negligence, action, or inaction of the Company, its employees, or representatives.

## ***3. Medical Treatment***

I authorize the Company to secure emergency medical treatment if deemed necessary, and I accept financial responsibility for any related costs.

## ***4. Media Release (Optional Clause)***

☐ I grant permission for Game Boyz Exp. to take and use photos or video footage of the participant for promotional and marketing purposes, without compensation.

## ***5. Minors***

If the participant is under 18 years of age, this release must be signed by a parent or legal guardian. The undersigned parent/guardian also agrees to the terms of this release on behalf of the minor.

## ***6. Governing Law***

This Agreement shall be governed by and construed in accordance with the laws of the State of Arkansas.

Signature (Participant or Parent/Guardian): \_\_\_\_\_

Printed Name: \_\_\_\_\_

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