

## Axtion Climb Inc. Waiver Form

### Waiver, Release, Hold Harmless and Indemnification Agreement.

As Consideration for being allowed to enter the play area and/or Participate in any party and/or program at Axtion Inc the undersigned, on his or her behalf, and on the behalf of the Participant(s) identified below, acknowledges, appreciates, understands, and agrees to the following.

1) I represent that I am the parent or legal guardian of the Participant(s) named below or I have obtained permission from the parent/legal guardian of the Participant(s) named below to execute this agreement on their behalf.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

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Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

Participant (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_.

2) I acknowledge and understand that there are risks associated with the participation in Axtion Climb Inc. activities and the use of the play area, equipment, inflatables and climbing equipment including but not limited to: contusions, fractures, scrapes, cuts, bumps, paralysis, or death.

3) I, for myself and the Participant(s) named, willingly assume the risks associated with participation and accept that there are also risks that may arise due to OTHER PARTICIPANTS which I also willingly assume

4) I agree that the Participant(s) named, and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any party and/or program at Axtion Climb Inc.

5) I, for myself, the Participant(s) named, our heirs, assigns, representatives, and next of kin agree to hold harmless and indemnify the independent owner of this Axtion Climb Inc. facility, their predecessors, parent, subsidiaries and affiliates, officers, and employees from any and all injuries, liabilities or damages from participation.

6) I additionally agree to indemnify the independent owner of this Axtion Climb Inc. facility, their predecessors, parent, subsidiaries and affiliates, officers, and employees arising from participation.

Parent/Guardian Name (please print): \_\_\_\_\_ Cell: \_\_\_\_\_.

Parent/Guardian Signature: \_\_\_\_\_.

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

Are you here for a Birthday Party? Yes \_\_\_ No \_\_\_; Birthday Kids Name: \_\_\_\_\_.

Are you here for General Admission Yes \_\_\_ No \_\_\_ Today's Date: \_\_\_\_\_

HAVE YOU FILLED OUT AN AXTION WAIVER BEFORE? Yes \_\_\_\_\_ No \_\_\_\_\_