Play Ground, LLC

Release and Waiver

Acknowledging participation in the activities at Play Ground, LLC, the undersigned, on his or her own behalf, and on behalf of any executors, heirs, successors and assigns, hereby acknowledges and agrees as follows:

1. I am fully aware of the risks and hazards connected with the activities which may take place in this building.

Such risks and hazards include but are not limited to:

- Falls on or from the equipment
- Collisions with the equipment or with other participants
- Tripping or slipping

I am aware that such activities include the risk of injury and even death, and I hereby elect to voluntarily participate in said activities, knowing that the activities may be hazardous to my property and me. I understand that Play Ground, LLC, does not require me to participate in this activity. I voluntarily assume full responsibility fo any risks of loss, property damage, or personal injury, including death, that may be sustained by me, or any loss of damage to property owned by me, as a result of being engaged in such an activities, whether caused by the negligence of releasees or otherwise, to the fullest extent allowed by law.

- 2. I understant that adult supervision of each child by that child's parent or authorized caregiver is required at all times. Play Ground, LLC shall not be liable for any injury resulting from an absence of adult supervision, including, but not limited to, any child leaving the property of Play Ground, LLC without a parent or caregiver.
- 3. I understand that my agreement and completion of this Waiver on the first visit will authorize Play Ground, LLC to use it as a continuous waiver for my child's/children's ongoing participation in the activities or use it as a Waiver executed for other child/children. I hereby expressly authorize Play Ground, LLC to use this Waiver as a multi-use waiver until I have expressed to change this in writing.
- 4. I further hereby agree to indemnify and hold harmless the releases from any loss, liability damange, or costs, including court costs and attorneys' fees that Releasees may incur due to my participation in said activities, whether caused by negligence or releasees or otherwise, to the fullest extent allowed by law.

Parent Or Legal Guardian Certification And Consent

I hereby certify that I am the parent or legal guardian of the Participant whose name appears below, and I have authority to waive rights on behalf of the minor Paticipant. I have read and understand all of the provisions of this document and the risks of the Activities. I understant that the Activities could cause injury and even death. I acknowledge that I have read and understand the terms of this document and I am freely and voluntarily signing this document.

USE OF PHOTOGRAPHY AND/OR VIDEOS

Play Ground, LLC

Release and Waiver

Play Ground, LLC, may use any photography/video taken at Play Ground, LLC without the expresed written permission of those included within the photography/video. Play Ground, LLC may use the photography/video in the publications or other media material produced, used or contracted by Play Ground, LLC including but not limited to: invitations, magazines, newspapers, brochures, television, social media, websites, etc. A person attending a Play Ground, LLC event who does not wish to have their image recorded should make their wishes known to Play Ground, LLC at 3169 Castro Valley Blvd. Castro Valley 94546. By participating in Play Ground, LLC, in writing, your desire to not have your photography used by Play Ground, LLC, you are agreeing to release, defend, hold harmless and indemnify Play Ground, LLC from any and all claims involving the use of your picture/video.

PLEASE REMEMBER TO BRING SOCKS FOR EVERYONE ENTERING THE PLAYGROUND, WE ARE A SOCKS ONLY FACILITY!

I HAVE READ THE ABOVE WAIVER AND BY SIGNING IT I AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE PLAY GROUND, LLC FROM ALL LIABILITY ARISING FROM UTILIZING THE FACILITIES.

Participant Name:	Birth date:	Age:
Participant Name:	Birth date:	Age:
Participant Name:	Birth date:	Age:
Participant Name:	Birth date:	Age:
Parent/Guardian of Child/Children: (signature) _		
Print Parent/Guardian Name:		
Emorgoney Contact Number	Today's Data	