

Kidz Play LLC
Release and Waiver

Last Name _____

Acknowledging participation in the activities at Kidz Play LLC (the company) facility in Winchester, Virginia, the undersigned, on his or her own behalf, and on behalf of any executors, heirs, successors and assigns, hereby acknowledges and agrees as follows:

I represent that I am the parent or legal guardian of the participant(s) named below, or I have obtained permission from the parent or legal guardian of the participant(s) named to execute this agreement on their behalf. I agree that the participant(s) below and I knowingly and fully assume all risks, know and unknown, associated with participation in activities at Kidz Play LLC indoor playground facility, and waives all claims to damage to personal property or injury to person arising from such participation. This release and waiver covers risks of death, serious injury and property loss whether arising from (a) negligence or carelessness on the part of the persons or entities being released and other participants, or (b) dangerous or defective equipment.

I, and the participant(s) named below shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any and all activities at Kidz Play LLC (the company) facility.

I, and the participant(s) named below certifies that he or she is physically fit and may participate in the activities available at Kidz Play LLC and has not been advised otherwise by a qualified medical professional.

The undersigned and the participant(s) named below, and our respective heirs, assigns, administrators, personal representatives, and next of kin, hereby release and hold harmless Kidz Play LLC in Winchester, Virginia, their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all Kidz Play LLC programs, activities, parties, the use of the play area and or equipment.

If I observe any hazard during our participation, I will bring it to the attention of the nearest Kidz Play LLC employee or manager immediately.

The Undersigned acknowledges that this release and waiver of liability form will be used and relied upon by the Kidz Play LLC (the company) and that it will govern the undersigned's actions and rights.

*******Read Before Signing*******

Parent/Guardian Signature: _____ Date _____

Parents/Guardian Print Names: _____

Participant Name: _____ Participant Date of Birth _____ / _____ / _____

Participant Name: _____ Participant Date of Birth _____ / _____ / _____

Participant Name: _____ Participant Date of Birth _____ / _____ / _____

Participant Name: _____ Participant Date of Birth _____ / _____ / _____

Address: _____ City _____ Zip _____

EMERGENCY CONTACT Telephone Number: _____

E-MAIL: _____ If you would like to receive email regarding Kidz Play

How did you hear about Kidz Play? _____

This waiver is good for 1 year