

Wiiii Play LLC Waiver and Rules

**Weight limit
180 pounds**

In Consideration of being allowed to enter the play area and/or participate in any party and/or program at Wiiii Play LLC, the undersigned, on his or her behalf, and on the behalf of the participants(s) identified below, acknowledges, appreciates and agrees to the following conditions:

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. I agree that the participant(s) named below 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 Wiiii Play. In addition, if I observe any hazard during our participation, I will bring it to the attention of the nearest Wiiii Play employee or official immediately.

I am aware that there are inherent risks associated with participation in Wiiii Play programs, parties, and/or use of the play area and inflatable equipment and I, on behalf of myself and the participant(s) named below, knowingly and freely assume all such risk, both known and unknown, including those that may arise out of the negligence of other participants; and, I agree to assume all responsibility for any damages caused by me or named participants to WiiiPlay Equipment or premises; and,

I, for myself and the participant(s) named below, and our respective heirs, assigns, administrators, personal representatives, and next of kin, hereby release and hold harmless, Wiiii Play LLC 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 Wiiii Play Programs, activities, parties, the use of the play area and/or inflatable equipments.

Participant Name Participant Date of Birth

Participant Name Participant Date of Birth

Parent/Guardian Signature Date:

Parent/Guardian Printed Name

Emergency Contact Phone # Address/City/Sate/Zip

TIME OF ENTRY

TIME OF EXIT Email (optional)