

**Waiver, Release, Hold Harmless and Indemnification Agreement**

As consideration for being allowed to enter the play area and/or participate in any program at Club Just Jump!, the undersigned, on his or her behalf, and on behalf of the Participant(s) identified below, 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) to execute this agreement on their behalf. **2.** I acknowledge and understand that there are risks associated with participation in Club Just Jump activities and the use of the inflatable equipment including but not limited to: contusions, fractures, scrapes, cuts, burns, 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. **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 program at Club Just Jump! **5.** I, for myself, the Participant(s) name, our heirs, assigns, representatives, and next of kin agree to hold harmless and indemnify the owners of JJ Club Just Jump, LLC d/b/a Club Just Jump!, their predecessors, parent company, subsidiaries, affiliates, officers and employees from any and all injuries, liabilities, attorney' fees, defense cost, expense arising from any and all claims, or damages from participation in any party and/or program held at Club Just Jump **6.** I am of physical ability to participate and am legally competent to understand and complete this agreement. I hereby execute this agreement without coercion.

Participant Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Email Address (CJJ! will never sell your information): \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

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