Playground Party Rentals

Participant Agreement and Assumption of Risk

Parent/Guardian/Participant (if over 18): First Name:			Last Name:			Date of Birth:	
Street Address:	Apt. #:	- 1000 (City:		State:	ZIP:	
Cell Phone:	Emergency Cor	ntact Number:		E-mail:			
Diameter Control	d Barty Bartala (BBB)						
franchisors, and all other persons or entities a release, indemnify, and discharge PPR, on follows: 1. I acknowledge that my participation in a PF unforeseeable risks that could result in physica simply cannot be eliminated without jeopardizin I understand and agree that: (I) The Risks m rope burn, sprains, fractures, scrapes, bruises a simple surface.	behalf of myself, my spouse RR game or activity, or call or emotional injury or daring the essential qualities of the ay Include, but are not Ilin and cuts, dislocations, pinchalf result in serious injury to such actions are strictly for other participants may give suit in serious injury to such actions are strictly for other participants may give sliminate all risks, including to assume any and all risks reinafter "the Covered Participants in spite of e. absolve, and agree to indicipants, including but not lie with my participation in the lons of PPR to the my pants are injured and/or receival be undertaken at my or behalf, incur attorney's fee such fees and costs and further cover any injury or dama agree that I am able to and Il risks associated with, aris PR 1 agree to do so sol	on, my children, c	parter collectively parents, my he per 's facilities or property, or to egligence of otherious injuries to (iii) Acrobatic maling to and from ') Neither PPR for the Act the Risks listed ad in, or arising agree that the harmless PPR respect to phy use of PPR shall be responded experious stance or treatment or treatment of the per shall be participants milear the costs of may be aggravent for the proper shall be responded experious the costs of may be aggravent for the proper shall be participants milear the costs of may be aggravent for the proper shall be participants milear the costs of the proper shall be participants milear the costs of the proper shall be participants milear the costs of the proper shall be participants milear the costs of the proper shall be participants milear the costs of the proper shall be participants milear the costs of the proper shall be participants milear the proper shall be proper shall b	ly referred to as PPR eirs, assigns, personal rej or equipment (the "Activitor third parties (the "Risks her participants or myself, to the head, back, or neck maneuvers such as flipping the Jung Jump inflata and Individual or in the Jungle Jump inflata to rent the Jungle Jump inflata to remotion in income and the Jungle the Jungle Jungl), I hereby a presentative are ties") may give "). I understan and (b) injuries which can care, running and ibles raises the are in a position ways not for rising from the cluding that of rticipation in the bility, claims, do and/or damas, including bonnection with any provision of ees, costs, and participating by self. physical conditions are ties and the cost and participating by self.	rise to both foreseeable and and agree that such Risk is including but not limited to use paralysis, or even death of physical contact with other possibility that the Covereion to recognize, identify, or reseeable or preventable by Activities. any persons engaging in this activity is purely voluntary emands, or causes of actioning to property, while on the put not limited to any such participation in the Activities of this agreement, I agree to did not be activities, whether the control of the Covered Participants of Florida shall apply to that	
NOTICE TO THE MINOR CHILD'S NATURAL READ THIS FORM COMPLETELY AND CARE ARE AGREEING THAT, EVEN IF PPR USINJURED OR KILLED BY PARTICIPATING IN OR ELIMINATED. BY SIGNING THIS FORM Y PERSONAL INJURY, INCLUDING DEATH, TO ACTIVITY. YOU HAVE THE RIGHT TO REFUS NOT SIGN THIS FORM. I further grant PPR the right to photogra appearance in connection with exhibitions, pul promotions and discounts to the email address participant Signature (If 18 or older):	FULLY. YOU ARE AGREEIN SES REASONABLE CARE II THIS ACTIVITY BECAUSE OU ARE GIVING UP YOU YOUR CHILD OR ANY PR E TO SIGN THIS FORM, A aph, videotape, and/or reco	NG TO LET YOUR N PROVIDING THE THERE ARE CERT R CHILD'S RIGHT OPERTY DAMAG ND HUKOO'S HA ord me and/or my motional material dge that I may uns	R MINOR CHILD HIS ACTIVITY, TAIN DANGERS TAND YOUR R GE THAT RESU AS THE RIGHT Of child/ward and s without resensubscribe to emis	D ENGAGE IN A POTEN' THERE IS A CHANCE YO S INHERENT IN THE ACT RIGHT TO RECOVER FRO LTS FROM THE RISKS T TO REFUSE TO LET YOU d to use my or my child' vation or limitation. I agn alls from PPR at any	TIALLY DANG UR CHILD MA FIVITY WHICH DM HAT ARE A N JR CHILD PAR s/wards' name	AY BE SERIOUSLY IT CANNOT BE AVOIDED LIN A LAWSUIT FOR ANY ATURAL PART OF THE ETICIPATE IF YOU DO	
				o:	-		
PARENT'S OR LEGAL GU	ARDIAN'S ADDITIONAL on of (print up to four mind	INDEMNIFICAT	ION (Must be d	completed for participant	ts under the a uardian):	ge of 18)	
Participant 1: First Name :	o- (p op to roor milit	Last Name:		paron or logar go	Date of Birt	h:	
Participant 2: First Name :		Last Name:			Date of Birt	h:	
Participant 3: First Name :		Last Name:			Date of Birt	h:	
Participant 4: First Name :		Last Name:		5.	Date of Birt	n:	
I certify that I am the parent or legal guardian o are brought by, or on behalf of Minor, and whic negligent acts or omissions of, to	h are in any way connected	with such use o				m any and all claims which those claims which allege	
Parent or Legal Guardian's Signature:			Print N	ame:			
Date:		Waiver	accepted by		(PPR Employee)	