ALTITUDE TRAMPOLINE PARK OF CONCORD LLC - ALTITUDE TRAMPOLINE PARK

PARTICIPANT AGREEMENT

WAIVER, RELEASE AND ASSUMPTION OF RISK

PARTICIPATION IN TRAMPOLINE COURT AND PARK ACTIVITIES ENTAILS KNOWN, ANTICIPATED AND UNANTICIPATED RISKS THAT COULD RESULT IN PHYSICAL AND/OR EMOTIONAL INJURY, PARALYSIS, DEATH OR DAMAGE TO YOUR SELF AND/OR TO OTHERS. RISKS MAY INCLUDE, BUT ARE NOT LIMITED TO, SLIPPING AND FALLING, LANDING IMPROPERLY, COLLISIONS WITH FIXED OBJECTS, MOVING OBJECTS AND/OR OTHER PEOPLE WHICH MAY RESULT IN SPRAINS, FRACTURES, BREAKS, SCRAPES, BRUISES, DISLOCATIONS AND INJURIES TO HEAD, BACK AND NECK,

	,
By providing my initi	als above, I acknowledge my understanding and agreement to the foregoing terms
operator of ALTITUDI TRAMPOLINE PARK (managers, directors	the services provided by ALTITUDE TRAMPOLINE PARK OF CONCORD LLC, a Delaware limited liability company, who is the owner and E TRAMPOLINE PARK (the "Park") and my desire to spectate and/or participate in the activities and services provided by ALTITUDE OF CONCORD LLC at the Park today and in the future ALTITUDE TRAMPOLINE PARK OF CONCORD LLC and its individual members, officers, agents, employees, volunteers, representatives, servants, predecessors, successors, assigns, affiliated entities, heirs, personal all other persons, firms, or entities claiming by or through them are hereinafter known as "Park Owner"):
l,	(print name), on behalf of myself, my spouse, my
	ld for whom I am appointed guardian, my parent(s), my heirs, assigns, personal representative and estate hereby:
(a) a	agree to use the Park and its facilities in a safe and responsible manner;
Initials	
that (i) those rules, in instructions and dire made; and (iii) in the the facility without d and representatives	agree to abide by the Park rules and instructions and the directions of Park employees and representatives, whereby I acknowledge instructions and directions are intended to promote the safety of both myself and others; (ii) my failure or refusal to abide by those rules, actions can lead to the immediate revocation of my right to use the Park and its facilities, without any right to refund of any payments event of sickness, accident or injury, (a) I will immediately report my injury to the Park's staff and under no circumstances will I leave oing so, (b) I will cease all participation in Park activities at that time of sickness, accident or injury, (c) I authorize the Park employees to obtain and secure, on my behalf, emergency medical treatment and transportation, when deemed appropriate by the Park esentatives, and (d) I agree to assume, at my expense, all costs of emergency medical care and transportation;
Initials	
judgments, damages whether known at the connection with: (a) whether such claims	agree to fully and forever waive, release and discharge Park Owner from any and all claims, actions, causes of action, demands, including compensatory, general, special, consequential, exemplary and punitive), liability or obligations of any nature or kind, ne time I leave the Park or which may arise or become known later, which accrue on account of, or in any way arise out of or in my activities within the Park; (b) the activities within the Park by others; (c) the operation of the Park by Park Owner regardless of a are founded in whole or in part upon alleged negligence, or the actual negligence of Park Owner; (d) my use of any and all of the Park use of any and all equipment within the Park, whether owned by me, Park Owner or a third party;
Initials	
and/or expenses wh	agree to indemnify and hold Park Owner harmless from and against any and all losses, liabilities, claims, obligations, costs, damages, atsoever, including, but not limited to, any and all attorneys' fees, costs, damages and/or judgments directly or indirectly arising out of, s or omissions while participating in any activities at the Park;
Initials	
·	agree to accept and assume all of the risks which accompany the Park's activities and represent that my participation in the activities is I elect to participate in the activities notwithstanding the risks;
Initials	
sufficient good healt pregnancy, orthoped	ully understand that participating in the activities within the Park involves physical exertion; and accordingly represent that I (i) am in the participate in activities within the Park; (ii) I do not have any pre-existing physical or medical condition, including without limitation ic problems, including back problems; heart problems; and/or breathing problems, that might be impacted or worsened by my use of II not use the Park and its facilities while under the use of any drugs, alcohol or medications that may impair my physical abilities or
	agree to (i) watch the Park's safety video before participating in any activity, (ii) attempt only activities that I feel I am capable of nd (iii) stay in areas that will not place me in danger,
Initials	
Park, or if not, I agre	certify that 1 have adequate insurance to cover any injury or damage I may cause or suffer while participating in the activities within the e to bear the costs of such injury or damage to myself and others; and,
Initials	

authorize Park Owner, and its successors to capture my image, likeness and sounds in photographs, videotapes, recordings or other

forms of media ("Images"), I acknowledge that Park Owner will own such Images and I grant permission, without compensation, for Park Owner, or any affiliated party of the Altitude Trampoline Park brand, to copyright, display, publish, distribute, use, modify and print such Images in any lawful manner,

including without limitation, in publications, advertisements, brochures, web sites, the foregoing authorization shall not include using my name with any Image, unles			
By providing my initials above, I acknowledge my understanding and agreement to	the foregoing terms		
agree that any legal proceeding shall be filed solely in the County of Merrimack, New Hampshire and I further agree that the substantive law of NEW HAMPSHIRE shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.			
By signing this document, I acknowledge that if anyone is hurt or property is by a court of law to have waived my right to maintain a lawsuit against Park herein. I have had sufficient opportunity to read this entire document. I have	Owner on the basis of any claim from which I have released them		
I understand and agree that: (i) that this Waiver, Release and Assumption of Risk giverights voluntarily, freely, under no threat of duress, without inducement, promise or proof of my intention to execute a complete and unconditional WAIVER AND RELEASE.	guarantee being communicated to me; and (iii) the signature below is		
Dated:			
PARTICIPANT: I represent that I am Eighteen (18) years of age or older (Signature)			
(Signature)			
Print Name - Picture I.D. required)			
If the Participant is not 18 years of age or older, then the following Parent or Guardi use the Park and its facilities.	an Consent must be read and signed before the Participant is allowed to		
PARENT OR GUARDIA	AN CONSENT		
I have read and understand the terms of this WAIVER, RELEASE AND ASSUMPTION statements, warranties, notices, representations, waivers and releases on behalf of name is:	· ·		
Print Your Child's or Ward's Name)	(Child or Ward's D.O.B)		
All such terms, statements, warranties, notices, representations, waivers and releasunderstand that, by signing this Consent, I am giving up important legal rights both claims against Park Owner. I have had sufficient opportunity to read this entire doctorms.	on behalf of myself and my child or ward regarding potential rights and		
	dian. I have been granted the everessed authority to evecute this Waiver		
I hereby warrant and represent that if I am neither the Child's Parent nor legal Guar Release and Assumption of Risk Agreement by, and on behalf of, the Child's Parent this agreement on behalf of another, I agree that I shall be solely liable for any and expense.	or Guardian. In the event that I do not have the authority to execute		
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