



## Bounce Zone Release and Waiver of Liability Form

If you are **18 or over** please fill out and sign this Disclaimer.

I wish to participate in activities at Bounce Zone Cork, an indoor trampoline arena which includes but is not limited to: trampolining, trampoline dunking, trampoline dodge ball, trampoline foam pit, trampoline fitness classes, games or any other activities (collectively hereinafter called "the Activity") organised by Bounce Zone.

I am eighteen years old or older. I agree that I will participate in the Activity as per the specific safety instructions set out before taking part in the activity. I agree to wear Bounce Zone approved grip socks and any other safety equipment listed by Bounce Zone in accordance with their safety procedures. Furthermore I shall ensure my own personal safety at all times and that I will follow the instructions, guidelines and rules of Bounce Zone and its management and staff at all times.

I understand and accept that the Activity can be physical and strenuous and requires a level of fitness and that I should not undertake it unless I am physically fit. I confirm that I do not know of any medical condition that I suffer from which might put me at risk of becoming involved in an incident which could result in injury to myself or others.

I accept that the Activity may be dangerous and that by taking part in the Activity there is a possibility of personal injury or death and/or property damage and I accept these risks I may be subject to while taking part in the Activity.

By taking part in the Activity, I understand and accept that Bounce Zone is not liable for any direct or indirect loss, damage or injury arising from or associated with my partaking in the Activity and I hereby waive all and any claims against Bounce Zone in this regard.

I hereby release, waive, forever hold harmless, indemnify and shall keep indemnified Bounce Zone from all claims for any injury, loss or damage sustained by me arising from or associated with the Activity and I hereby indemnify Bounce Zone against all claims made by any other person against Bounce Zone in respect of any injury, loss or damage arising out of or in connection with my failure to comply with the safety instructions and /or directions of Bounce Zone, its management or staff. I understand that photographs or videos may be taken occasionally which may be used for publicity purposes. Bounce Zone is monitored by CCTV for the safety of our customers and staff.

I acknowledge and accept this Form may be pleaded as a bar to any action or proceedings taken by me at any time against Bounce Zone arising out of or as a consequence of my taking part in the Activity.

I acknowledge that I have read and fully understand the above prior to my signing below.

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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

Emergency Contact Name \_\_\_\_\_ Contact Number \_\_\_\_\_