

BOUNCE HOUSE/INFLATABLES WAIVER FORM

Participant Name(s): _____

I give permission for my child/children to participate in the use of the bounce house/inflatable (I have read and agree to the Waiver and Release of Liability statement below) Yes

WAIVER AND RELEASE OF LIABILITY STATEMENT

In consideration of being allowed to participate in the bounce house activities provided by the Sudbury Park & Recreation Department, I, the undersigned, acknowledge, appreciate, and agree to the following

1. Assumption of Risk

I fully understand that participation in bounce house activities involves inherent risks, including but not limited to the risk of injury, falls, collisions, and other accidents, which may result in serious injury or death. I voluntarily assume all risks associated with the use of the bounce house.

2. Release and Waiver of Liability

I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release, waive, and discharge the Sudbury Park & Recreation Department, its employees, agents, and representatives, from any and all liability, claims, demands, or causes of action for injury, illness, disability, death, or loss or damage to personal property arising from or in connection with my participation in bounce house activities.

3. Indemnification

I agree to indemnify and hold harmless the Sudbury Park & Recreation Department from any claims, demands, or damages, including reasonable attorney's fees, arising from my participation in the bounce house activities, including any claim by a third party.

4. Acknowledgement of Rules and Safety Instructions

I agree to follow all rules, regulations, and safety instructions provided by the Sudbury Park & Recreation Department regarding the use of the bounce house. I understand that failure to comply with these instructions may result in expulsion from the activity.

5. Medical Conditions

I acknowledge that I am physically fit and have no known medical conditions that would prevent me from safely participating in the bounce house activities. In the event of an injury, I authorize the Sudbury Park & Recreation Department to provide or seek emergency medical treatment.

6. Photography/Video Release Statement

I consent to the use of photographs or video footage taken during the event for promotional purposes by the Sudbury Park & Recreation Department.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS WAIVER AND RELEASE OF LIABILITY FORM, AND I AGREE TO BE BOUND BY ITS TERMS.

Parent/Guardian Signature (if under 18 years old) TYPE NAME BELOW
