Launch Trampoline Park Assumption of Risk, Waiver of Liability, And Indemnification Agreement ("Agreement")

Participant #:	First Name (Print)	Last Name (Print)	Birthdate
Participant 1:			
Participant 2:			
Participant 3:			
Participant 4:			

In consideration for gaining access to and use of WSF, Inc., D/B/A Launch Trampoline Park, Queens, NY, a New York limited liability company ("WSF"), property, facilities and services ("WSF Facilities and Services") and engaging in the use of and participation in the facilities, equipment and activities in and associated with WSF ("WSF Activities"), I the undersigned, on behalf of myself and my spouse, children, parents, legal wards, heirs, assigns, personal representatives, estate, and insurers, and on behalf of any Minor Participant listed above, agree as follows:

____ (Initial here) I am the Adult Participant and/or Parent/Guardian on behalf of a Minor Participant listed above and I hereby acknowledge, accept and agree that participation in WSF Activities, particularly the use of trampolines, inflatable "bounce houses", advanced and/or aerial obstacle course equipment, rock climbing and bouldering features, mini bowling, laser tag, children's playground, and XD theatre, involve known and unanticipated risks that could result in physical and/or emotional injury, which include but are not limited to broken bones, sprained or torn muscles or ligaments, paralysis, other bodily injury, or death, or property damage caused by myself, a Minor Participant, or a third party. I acknowledge that the above list is not inclusive of all possible risks associated with use of WSF Facilities and Services and participation in WSF Activities, and I agree that such list in no way limits the extent or reach of this Agreement. I acknowledge and understand that such risks cannot be eradicated without jeopardizing the core qualities of WSF Activities. I acknowledge that the aforementioned risk of physical and/or emotional injuries may also happen to an observer or bystander. I have received information to my satisfaction regarding the use of WSF Facilities and Services and participation in any and all WSF Activities and have had the opportunity to ask any and all questions I desired to ask. I understand the demands of WSF Activities are relative to my and/or Minor Participant(s)'s physical condition and skill level and acknowledge the types of injuries that may occur as a result of WSF Activities and the potential impact on an individual's well-being and lifestyle. **I hereby agree that my access and access of a Minor Participant to WSF Facilities and Services and participation in WSF Activities is voluntary and that I knowingly assume all inherent risks.**

____ (Initial here) In further consideration of access and use of WSF Facilities and Services and participation in WSF Activities, I, Adult Participant and/or Parent/Guardian on behalf of Minor Participant, on behalf of myself, my spouse, my heirs, legal wards, personal representatives, assigns, and Minor Participant(s) (collectively, "Releasing Parties") do hereby release, waive, and discharge WSF, its owners, directors, managers, officers, employees, affiliates, volunteers, independent contractors, equipment providers, and agents (collectively, "Protected Parties") from legal liability, claims, demands, and causes of action, whether the same is known or unknown, anticipated or not, arising from the ordinary negligence of WSF or Protected Parties, including personal and/or emotional injury or death from incidents or illnesses arising from participation in WSF Activities and any and all claims resulting from the damage to, loss of, or theft of property, and I, for myself and on behalf of Releasing Parties, further agree that except in the event of WSF's gross negligence and/or willful and wanton misconduct, I shall not bring any claims, demands, legal liability, and/or causes of action against WSF for any losses, whether economic or non-economic, due to property damage, personal and/or emotional injury or death sustained by me or Minor Participant(s) that are in any way associated with WSF Facilities and Services or WSF Activities. I, Adult Participant and/or Parent/Guardian on behalf of Minor Participant, further agree to hold harmless, release, discharge, defend, and indemnify WSF and Protected Parties (*i.e.*, defend and pay any judgment and costs, including attorneys' fees and related expenses) from any and all claims of the Releasing Parties arising from injury or loss due to participation of myself or a Minor Participant at WSF (including claims arising from the inherent risks of WSF Activities and those arising from the ordinary negligence of WSF or Protected Parties). I further agree to hold harmless, defend, and indemnify WSF and Protected Parties against any and all claims of co-participants, rescuers, and others arising from conduct of myself or a Minor Participant in the course of my participation or Minor Participant(s)'s participation at WSF (including claims arising from the inherent risks of WSF activities and those arising from the ordinary negligence of WSF or Protected Parties). In the event any dispute arises, I, the Adult Participant and/or Parent/Guardian on behalf of Minor Participant, agree bring such dispute within one (1) year of the date of this Agreement and to engage in mediation to settle the dispute. Any agreement reached will be formalized by a written contractual agreement at that time. Should the issue not be resolved by mediation, I agree that all disputes, controversies, or claims arising out of my participation or Minor Participant(s)'s participation at WSF shall be submitted to binding arbitration in accordance with the applicable rules of the American Arbitration Association then in effect.

____ (Initial here) I, Adult Participant and/or Parent/Guardian on behalf of Minor Participant, hereby acknowledge, agree to and/or certify the following: I and/or Minor Participant is/are physically and emotionally able to participate in any and all WSF Activities without aid or assistance; I and/or Minor Participant am willing to assume the risk of any physical or medical condition I and/or Minor Participant may have; I have read all rules governing participation of myself or a Minor Participant in WSF Activities ("WSF Rules"), I have explained such rules to any Minor Participant(s) listed in this Agreement, and I understand that failure to follow all WSF Rules may result in the expulsion of myself and/or Minor Participant(s) listed in this Agreement from this WSF location; This Agreement supersedes any and all previous oral or written promises or agreements with WSF, this is the entire agreement between me and/or Minor Participant(s) and WSF, and that the Agreement cannot be modified or changed in any way by representations or statements by any agent or employee of WSF; I am at least eighteen (18) years old; I acknowledge it is my or a Minor Participant's duty to inform staff and cease exercise immediately if I or a Minor Participant feels any unusual discomfort or suffers any injury during participation and alert the staff to any rules violations or dangerous behavior of co-participants; **I agree to inform WSF of any injury (even minor injuries) prior to leaving the WSF facility** and agree to assume all costs of emergency medical care and transportation; I grant WSF the right, without limitation, to photograph, videotape and/or record me and/or a Minor Participant and authorize WSF to use any such photographs, images, or likenesses in WSF marketing and displays, regardless of media; and I expressly agree that the foregoing Agreement is intended to be as broad and inclusive as is permitted by applicable laws and that if any portion thereof is held void or unenforceable, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

By signing this Agreement, I understand that I am giving up substantial rights, including my right to sue and any right to sue on behalf of Minor Participant(s), and I acknowledge I am signing the agreement freely, voluntarily, and intelligently, and with the full knowledge of its legal consequences. I intend my signature to be a complete and unconditional release of all liability due to ordinary negligence by WSF and the Protected Parties to the greatest extent allowed by law. I certify I am the parent or legal guardian of any Minor Participant listed in this Agreement or have been granted power of attorney to execute this Agreement on behalf of a parent or legal guardian of such Minor Participant. In the event I do not have the authority to execute this Agreement on behalf of another, I agree I shall be solely liable for any and all resulting claims, actions, penalties, causes of action, services, fees, or similar expense.

Adult Participant's Signature or Signature of Parent/Guardian of Minor Participant(s)	Driver's License Number	Date

Please provide the following information for Adult Participant or Parent/Guardian of Minor Participant(s) (Please Print):

First Name:	Last Name:	Birthdate:	
Street Address:	City:	State:	Zip:
Primary Phone Number:	Email Address:		
Emergency Contact:	Contact Phone Number:		

☐ Please check box if you would like to receive email discounts and promotions at the above email address.

Agreement accepted by: _____ (WSF Employee)