

LIABILITY RELEASE FORMS

Name of Business: Adventure Zone, Inc.

Activity: Climbing Wall dba "The Rock" and Rappelling wall dba "The Wall".

Name of Participant:

I understand that participation in the above activities or events may be hazardous for the above-named participant.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the above-named activity. I hereby release Adventure Zone Inc, and its officers, employees, or agents from any liability, costs and damages resulting this individuals participation.

If the participant is a minor:

I agree that the minor has my consent to participate in the event or activity.

I also give my consent for the business to seek emergency treatment for the minor if necessary and I agree to accept financial responsibility for the costs related to this emergency treatment.

Participant's Signature

Date

If Participant is Under 18:

Name of parent or guardian

Date

Signature of Parent or Guardian

Date
