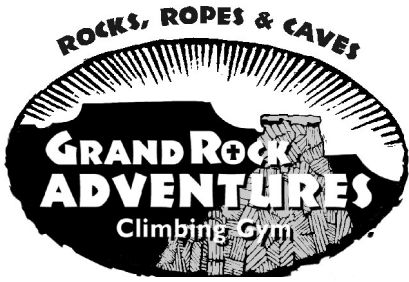


You're Invited To A Climbing Party!

For: _____

Date: _____ Time: from _____ to _____

Place: _____



Be sure to wear
Tennis Shoes & Comfortable Clothes
to climb in!

At Kidzplex 609 25 Rd (25 Rd & Patterson) 245-3610 ext 204 or 205

Just call as soon as possible and let us know that you can be there for all the fun!

RSVP (parent) _____

WAIVER MUST BE COMPLETELY FILLED OUT IN ORDER FOR CLIMBER TO PARTICIPATE

Please read the following carefully, initial each item and sign at the bottom:

I hereby understand, acknowledge, and agree as follows: (This is a legal, binding document)

- 1 That climbing is an inherently hazardous and dangerous activity that can result in harm, loss damage, personal injuries, or death.
- 2 That my use of the Grand Rock Adventures at KidzPlex and its facilities, equipment, or apparatus (hereinafter, the "GRA") is entirely voluntary and with a complete and full understanding that any and all such usage including, but not limited to climbing involves hazards and dangers that can result in harm, loss, damage, personal injuries and death, and that I assume all risks and responsibility for any harm, loss, damage, personal injury, or death resulting from or in connection with any and all such usage.
- 3 That I will obey and comply with all rules, regulations or instructions of the climbing gym or its employees or agents, and that I have a responsibility to ask questions and clarify any rules, regulations, or instructions if I do not understand or have any doubts about any rules, regulations or instructions.
- 4 That I have an obligation and responsibility to myself, as well as to other users of GRA to conduct myself in a safe and reasonable manner; that I will not use GRA while under the influence of drugs or alcohol; and that I believe I have no physical or psychological problems that would prohibit my safe participation in GRA activities.
- 5 That I am responsible for checking and maintaining the safety and good operating condition of any and all personal equipment, gear, or apparel that I may utilize while using the GRA, regardless of where or from whom I may have obtained such personal equipment, gear, or apparel; that any equipment, gear or apparel that I may receive, rent or borrow from the GRA or any GRA facilities, equipment, gear or apparel that I may use, **I use at my own risk.**
- 6 That in consideration of being permitted to use the GRA for myself and on behalf of my heirs, personal representative, and assigns, I hereby waive, release and discharge forever, the KidzPlex, Inc, their respective officers, directors, employees, and agents from any and all liabilities, claims, demands, or causes of action whatsoever for any harm, loss, damage, personal injuries, or death, due to negligence or any other cause resulting from, arising out of, or in connection with my use of the gym, its facilities, equipment, or apparatus.

I represent and acknowledge that I have carefully read, clearly understand, and voluntarily sign that acknowledgment of risk, waiver of liability, and release of liability.

Signature of CLIMBER _____ Date _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION
(Must be completed for participants under the age of 18)

I the undersigned parent, guardian or custodian of the above minor, for myself and on behalf of said minor, hereby join in the foregoing acknowledgment of risk, waiver of liability and release of liability and hereby stipulate and agree to waive and release and indemnify and hold harmless GRA at KidzPlex, Inc. their respective officers, directors, employees and agents from and against any and all claims, actions, causes of actions, liabilities, suits, expenses (including reasonable attorneys fees) and negligence made or brought by said minor or by anyone on behalf of said minor, further agree not to sue GRA, KidzPlex, Inc as a result of any damage, loss, injury, paralysis or death that said minor suffers in connection with said minor's use of the GRA, its facilities, equipment, or apparatus.

Signature of PARENT OR LEGAL GUARDIAN _____

Print Name & Relationship _____ Date _____

PERSONAL INFORMATION

Name of Climber (please print clearly) _____

Male ___ Female ___ Age ___ Birthdate _____ Phone _____

Address _____ City _____ State ___ Zip Code _____