



## WAIVER OF LIABILITY FOR MINOR

I hereby assume all of the risks for my child in participating in any/all activities associated with the Escape SBC event, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I understand that this activity has potential risks including, but not limited to:

1. Use of simple tools;
2. Potentially moving or lifting objects of not more than twenty (20) pounds;
3. Mental stress and anxiety;
4. Being in a reasonably small space with up to ten (10) persons;
5. Possibility of failure to escape the room in the allotted time

My child has no physical or mental illness that precludes their participation in a safe manner for themselves or others. I certify that they are not under the influence of drugs or alcohol which impairs their ability to maintain their safety awareness or endangers others.

I acknowledge that this Waiver of Liability form will be used by the organizers of the activity in which my child may participate, and that it will govern their actions and responsibilities at said activity. I agree that all staff or authorized agents may, in their sole discretion, determine it is unsafe for my child or others for my child's participation to continue, remove my child from the premises by any lawful means.

In consideration of my application and permitting my child to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assign as follows:

- A. I WAIVE, RELEASE, and DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or person released, for my child's death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me, THE FOLLOWING ENTITIES OR PERSONS:  
The directors, officers, employees, volunteers, representatives, and agents of any and all entities authorizing this activity;
- B. INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph or the above paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that the directors, officers, employees, volunteers, representatives, and agents of any authorizing entity are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I hereby consent for my child named below to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, my child may be photographed. I agree to allow that photo, video, or film likeness to be used for any legitimate purpose this authorizing entity decides, and assigns.

The Waiver of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under the applicable law.

**I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.**

\_\_\_\_\_  
Printed name of participant

\_\_\_\_\_  
Printed name of parent or guardian

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
How did you hear about Escape SBC?