



## **PARTICIPATION WAIVER AND RELEASE**

Parent/Guardian Name:

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

Child Name:

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

I understand and agree with the following statements:

\_\_\_ I am the parent/guardian of the child stated above.

\_\_\_ I voluntarily elect for my child to participate in playing in the bounce obstacle course.

\_\_\_ I fully understand this involves jumping on an air-filled entertainment toy, bounce obstacle course and any injury to my child will be entirely my responsibility.

\_\_\_ I fully understand the health and safety risks associated with these types of activities. I, therefore, assume all risk of injury associated with this event. I will not hold QuikTrip Corporation, its subsidiaries, owners, shareholders, employees, agents, or anyone affiliated with its management (collectively, "QuikTrip"), liable for any circumstances of this event and I waive any and all claims for my child or myself against QuikTrip for any injury or illness which may directly or indirectly result from my child's participation in this event.

\_\_\_ I hereby confirm that my child is in good physical condition and does not suffer from any disabilities or physical conditions that place my child or others at risk or otherwise physically inhibit participation in this event.

\_\_\_ By this waiver and release, I acknowledge that I have read, understand, and fully agree to the terms of this waiver and release and its contents. My signature is proof of my intent to execute a complete and unconditional waiver and release of all liabilities in force under the law.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date