

**House of Bounce LLC
6301 Bandel Rd NW, Suite 603
Rochester, Mn. 55901
507-292-0372
ASSUMPTION OF RISK**

Participant(s) Name: _____ **Date of Birth:** _____

Home Address: _____ **Phone:** _____

The undersigned participant and his or her parents or legal guardian, if participant is under the age of eighteen (18), does (do) hereby execute this Assumption of Risk for himself (herself) (themselves), and his (her) (their) heirs, successors, representatives and assigns, and hereby agree(s) and represent(s) as follows:

I am aware that during my participation in activities at the House of Bounce LLC, certain dangers may occur, including but not limited to: walking on uneven surfaces, bouncing on surfaces that are not firm, bumps on the head and other areas of the body, bruises, slide burns, sliding on slippery surfaces, sprained joints, whiplash, broken bones, severe neck, head and back injuries; death, injuries from running or walking in general, injuries from climbing, injuries from going through obstacles, injuries from improper use of the equipment and/or failing to use the provided safety equipment, injuries from other participants or supervisors or other spectators or non-participants, and the forces of nature.

I understand that inflatable activities, laser tag, monkey jump, bumper cars and other amusement activities are inherently dangerous activities and that the risks associated with these activities are generally recognized as dangerous.

In consideration of, and as part payment for, the right to participate in activities at the House of Bounce LLC, I have and do hereby hold House of Bounce LLC, harmless from any and all liability, actions, causes of action, debts, claims, demands of every kind and nature whatsoever which may arise of or in connection with the activities referenced above. The terms thereof shall serve as a release and assumption of risk for my heirs, executor and administrators and for all members of my family, including minors accompanying me.

I understand that the activities referenced above have many inherent risks from the standpoint of being basically a physical sport and/or activity. I acknowledge these risks and voluntarily agree to participate in these activities as referenced above at my own risk.

I, the undersigned, have read this Assumption of Risk and understand its terms and the risks involved and accept these risks. I understand and agree by my signature hereon that I have had the opportunity to discuss this document with anyone that I might choose and that I freely sign it. I declare under penalty of perjury of the laws of the State of Minnesota that the foregoing is true and correct.

Signature of Participant

(Print Name)

Date

**Signature of Parent or Guardian if
Participant is under 18 years of age**

(Print Name)

Date