



**Waivers and socks are always needed to play at Pump It Up of Marietta**

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**PIU Waiver Form**

In consideration of being allowed to enter into the premises in any program at Pump It Up – Marietta, the undersigned, on his/ her own behalf, and/or on the behalf of the participant(s) identified below, acknowledges, appreciates and agrees to the following conditions:

I represent that I am the legal guardian of the participant(s) named below or have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions. I am aware that there are inherent risks associated with participation in Pump It Up programs involving inflatables, and I, on behalf of myself and the participant(s) below, knowingly and freely assumed all such risks, both known and unknown, including those that may arise out of the negligence of other participants. I, for myself and for the participant(s) named below, and our representatives heirs, administrators, personal representatives and next of kin, hereby release and hold harmless EKC, Inc., dba Pump It up – Marietta and PIU Management, LLC, their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all Pump It Up programs and the use of the facility and/or the inflatable equipment.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Emergency Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_